

# Young Savers Account Application



The completion and delivery or mailing of an application to Butterfield Bank (Cayman) Ltd. shall constitute acceptance of the Bank's Terms and Conditions by the parent or guardian on behalf of the Young Saver.

Account Name (Parent/Guardian and child)

## CUSTOMER INFORMATION

CIF # (FOR BANK USE ONLY)						
	PARENT/GUARDIAN APPLICANT	PARENT/GUARDIAN APPLICANT	CHILD APPLICANT			
First & Middle Names						
Last Name						
Nationality						
Citizenship						
ID Type and Number, e.g. passport						
Date of Birth (dd/mm/yyyy)						
Phone Details	Home	Cell	Home	Cell	Home	Cell
E-Mail address						
Mailing address and postal code						
Relationship to child		Relationship to child		Name of child's school		
Applicant Signature(s) (please sign within block)				Minor Signature		

**Young Savers Debit Card:**  Yes  No (Daily ATM withdrawal limit - CI \$50.00)

### Declaration of parent/guardian of account holder:

I, \_\_\_\_\_, parent / guardian of \_\_\_\_\_, authorise the issuance of a Debit Card to \_\_\_\_\_, a minor between the ages of 14 and 17. I understand and accept full responsibility for the use of this product by the minor.

Card to be collected from:  Butterfield Place  Governors Square  Compass Banking Centre

Card to be collected by: Signature of parent or guardian

Signature of this card application constitutes the acceptance of the Butterfield Cardholder Agreement on reverse of this application.

**Online banking** (view only):  Yes  No

### Declaration of parent/guardian of account holder:

I, \_\_\_\_\_, parent / guardian of \_\_\_\_\_, request that Butterfield activate the use of "view only" Online Banking Service ("The Service") to \_\_\_\_\_, a minor. I understand and accept full responsibility for the use of this product by the minor.

Collect your Butterfield Online User ID and Password from:  Butterfield Place  Governors Square  Compass Banking Centre

Signature of parent or guardian

Signature constitutes the acceptance of the Butterfield Online Personal Banking Agreement on reverse of this application.

## ACCOUNT FINANCIAL DETAILS

Amount of Initial Deposit: \$

Initial funds will be deposited via:  Bank Draft  Internal Transfer  Personal Cheque  Cash

Other (please describe):

Source of incoming future funds (Select all that apply):

Gifts from Family

Wages/Tips

Other

Estimated total monthly incoming funds:\$

Estimated total monthly outgoing funds:\$

## DECLARATION OF ACCOUNT HOLDER

### PLEASE READ & SIGN THE DECLARATION BELOW:

I/we confirm that the personal details I/we have supplied are to the best of my/our knowledge true and correct as of this date.

I/We confirm that I/we comply with all tax and exchange control reporting requirements imposed on me/us by any applicable jurisdiction in respect of this proposed account and any other accounts that I/we hold with you.

I/we further confirm I/we have read and understood, and received a copy of the General Regulations and Conditions, attached hereto.

Customer Signature:

OPENED BY:

\_\_\_\_\_

\_\_\_\_\_

Customer Signature:

AUTHORISED BY:

\_\_\_\_\_

\_\_\_\_\_

Customer Signature:

REVIEWED BY:

Date:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### JOINT ACCOUNT MANDATE

For the purpose of this mandate, I/we understand that all withdrawals from the Young Savers account must be authorised by the parent/guardian. Exception to the aforementioned applies in cases where the parent/guardian have authorised the issuance of a Young Savers debit card to the minor.

## BANK USE ONLY

CLIENT New  Existing

ACCOUNT New  Amended

Account Number

Account Number

\_\_\_\_\_

\_\_\_\_\_

Completed by

Date

\_\_\_\_\_

\_\_\_\_\_