

PERSONAL DEPOSIT ACCOUNT AGREEMENT

TO: "CBWC FOUNDATION"

201, 221 – 10th Avenue SE, Calgary AB T2G 0V9



DEPOSITOR		CO-DEPOSITOR	
SOCIAL INSURANCE NO.		SOCIAL INSURANCE NO.	
EMAIL		EMAIL	
WORK PHONE CELL PHONE HOME PHONE		WORK PHONE CELL PHONE HOME PHONE	
MAILING ADDRESS		MAILING ADDRESS <i>(if different)</i>	
DEPOSIT DATE		INITIAL DEPOSIT AMOUNT (\$)	

SIGNING AUTHORITY EITHER / OR TO SIGN INITIAL _____ INITIAL _____
 BOTH TO SIGN INITIAL _____ INITIAL _____

INTEREST **Rates (*subject to change) NEW at July 1, 2016**

\$1K - \$199,999 →	1.75%	\$600K - \$799,999 →	2.125%
\$200K - \$399,999 →	1.875%	\$800K - \$999,999 →	2.25%
\$400K - \$599,999 →	2.0%	\$1MM+ →	2.75%

Deposits received at the Foundation office on or BEFORE the 15th day of each month, will receive accrued interest from the 1st day of the same month. Deposits received AFTER the 15th day of the month, will earn interest from the 1st day of the following month and will compound monthly.

INTEREST OPTIONS **Please choose one interest option below:**

- Compound accumulated interest to the account balance, unless otherwise notified
- Distribute semi-annual interest payments (Jun & Dec)
- Distribute annual interest payments Dec 31 each year

Signature _____ Signature _____

DEPOSIT OPTIONS

1. **CHEQUE** or AMOUNT \$ _____ CHEQUE# _____

2. **ELECTRONIC** If you wish to deposit to your account on a regular monthly basis, kindly complete the banking information below and/or provide a void cheque. A pre-authorized debit form will be sent for completion.

Signature _____ Signature _____

BANK NAME: _____ TRANSIT #: (5 numbers) _____

BANK # (3 numbers) _____ ACCOUNT #: _____

Kindly return signed form & copy of picture ID (ie: Driver's License or Passport) to the CBWC Foundation office via email creid@cbwcfoundation.ca