

CDF Cheque Account Application Form (MACS Schools)

CDF Account Name

Contact Name

Address

Postcode

Phone

Postal Address (if different from above)

Postcode

Email

Authority to Amend

Authority to amend this account authority is limited to nominated MACS Ltd officers listed as an Approver and those with amending authority within the school (primary schools – Principal, Colleges – Principal or Business Manager).

Authority to Operate: (Any 2 to sign)

I authorise the persons named and whose specimen signatures appear on page 2, in addition to the existing MACS signatories to:

- sign, draw, make, accept, endorse or make arrangements with you regarding cheques, or
- otherwise operate on this account.

Signatory/s to operate this account

SIGNATORY 1

Title Name

Address

Postcode

Position

Signature

Phone

Do you currently operate on any CDF accounts?

 Yes No

If Yes, CDF Account Number

CDF Online Access Required?

 Yes No

SIGNATORY 2

Title Name

Address

Postcode

Position

Signature

Phone

Do you currently operate on any CDF accounts?

 Yes No

If Yes, CDF Account Number

CDF Online Access Required?

 Yes No

SIGNATORY 3

Title Name

Address

Postcode

Position

Signature

Phone

Do you currently operate on any CDF accounts?

 Yes No

If Yes, CDF Account Number

CDF Online Access Required?

 Yes No

SIGNATORY 4

Title Name

Address

Postcode

Position

Signature

Phone

Do you currently operate on any CDF accounts?

 Yes No

If Yes, CDF Account Number

CDF Online Access Required?

 Yes No

