

# BANK ENROLLMENT & UPDATE FORM

(FOR BANK USE ONLY)



**ACCOUNT NO. / S.R.F. N. 777-954-405**

**Special Olympics**  
Ontario



RBC LOCAL BRANCHES ARE NOT  
AUTHORIZED TO PROCESS THIS FORM.  
PLEASE READ INSTRUCTIONS ON PAGE 2.

- Special Olympics Ontario

**NAME OF ACCOUNT** (PLEASE PRINT NAME OF COMMUNITY OR CLUB ABOVE)

**TRANSIT 06702**

**ACCOUNT NUMBER:**

OPEN A NEW ACCOUNT

GENERAL

TRUST

CHANGE EXISTING INFORMATION

ADDRESS CHANGE

CHANGE SIGNING OFFICERS

THIS IS A NON-PRIMARY ACCOUNT		BANK STATEMENT MAILING ADDRESS
COMMUNITY OR CLUB NAME		
ATTENTION OF (FULL NAME)		CLUB REGISTRATION #
STREET #	STREET NAME	APT / UNIT #
P.O. BOX	CITY	
POSTAL CODE	TELEPHONE	

**AUTHORIZED SIGNING OFFICERS — ANY TWO TO SIGN**

SIGNING OFFICERS MUST BE REGISTERED VOLUNTEERS OF SPECIAL OLYMPICS ONTARIO (SOO) AND MUST HAVE SUBMITTED A POLICE BACKGROUND CHECK TO SOO.

SIGNING OFFICER #1	<input type="checkbox"/> TREASURER	<input type="checkbox"/> OTHER	
FIRST & LAST NAME		VOLUNTEER REGISTRATION #	
STREET #	STREET NAME	APT / UNIT #	
P.O. BOX	CITY		
POSTAL CODE	TELEPHONE		
EMAIL			



<b>SIGNING OFFICER #2</b>		<input type="checkbox"/> TREASURER	<input type="checkbox"/> OTHER	
FIRST & LAST NAME		VOLUNTEER REGISTRATION #		
STREET #	STREET NAME	APT / UNIT #		
P.O. BOX		CITY		
POSTAL CODE		TELEPHONE		
EMAIL				

<b>SIGNING OFFICER #3</b>		<input type="checkbox"/> TREASURER	<input type="checkbox"/> OTHER	
FIRST & LAST NAME		VOLUNTEER REGISTRATION #		
STREET #	STREET NAME	APT / UNIT #		
P.O. BOX		CITY		
POSTAL CODE		TELEPHONE		
EMAIL				

<b>SIGNING OFFICER #4</b>		<input type="checkbox"/> TREASURER	<input type="checkbox"/> OTHER	
FIRST & LAST NAME		VOLUNTEER REGISTRATION #		
STREET #	STREET NAME	APT / UNIT #		
P.O. BOX		CITY		
POSTAL CODE		TELEPHONE		
EMAIL				

**INSTRUCTIONS:**

COMPLETE BANK ENROLLMENT & UPDATE FORM WITH SIGNATURE CARD AND SEND ALL 3 PAGES TO:

SPECIAL OLYMPICS ONTARIO  
65 OVERLEA BLVD. SUITE 200  
TORONTO, ON M4H 1P1

THIS FORM WILL BE PROCESS THROUGH RBC COMMERCIAL SERVICES DDA TEAM AT TRANSIT 07512

OFFICE USE	RECEIVED AT SOO	SENT TO RBC	BY

# SIGNATURE CARD



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SUNDRY INFORMATION

## INSTRUCTIONS RE SIGNING OF CHEQUES

ANY 2 TO SIGN

NAME & TITLE	SIGNATURE

BRANCH

DATE \_\_\_\_\_  
MONTH/DATE/YEAR

(FOR BANK USE ONLY)

INITIALS
Prepared By