

## JOINT ACCOUNT AUTHORIZATION

<u>Instructions</u>: Please use one form for each Account to be made joint. This completed form will serve as the signature card for this Joint Account.

**JOINT Accounts:** An account will be considered as joint if the joint application form has been completed and the joint signature card has been signed in addition to the individual member applications and signature cards. If more than one individual has signed the Signature Card for an Account, then that Account will be a joint Account to which the following provisions apply:

- **a) JOINT AND SEVERAL LIABILITY** -- We will be jointly and severally liable to you for the performance of all of our duties under this Agreement and the Disclosure Statement.
- **b) Account Credits** -- All funds you receive from or for any one or more of us may be credited to the joint Account. You may also endorse any bills of exchange and other instruments received from or for any one or more of us.
- c) SIGNATURES -- If the Signature Card designates a joint Account as:
  - i)"ANY ONE TO SIGN", you may honour a cheque or other withdrawal from the joint Account that has been signed by any one (or more) of us.
  - **ii)"ALL TO SIGN"**, you may honour a cheque or other withdrawal from the joint Account only if the cheque or other withdrawal has been signed by all of us.
  - **iii)** "OTHER (SPECIFY)", you may honour a cheque or other withdrawal from the joint Account only if the cheque or other withdrawal has been signed by those of us, or the agreed number of us, identified on the Signature Card.
- **d) STOP PAYEMNT** -- You may stop payment of a cheque, instrument or other item drawn on the joint Account when any one of us issues a stop payment order.
- e) Survivorship -- Each of us hereby assigns and transfers to all of us jointly, and the survivor or survivors of us jointly, all funds now or in the future on deposit in the joint Account. All of those funds will continue to be the joint property of all of us, with the right of survivorship. The death of any one (or more) of us will not affect the right of the survivor, the survivors or any one (or more) of the survivors, as the case may be, to withdraw any funds on deposit in the joint Account.

Alterna Savings and Credit Union Limited eligible deposits are insured through the Financial Services Regulatory Authority of Ontario (formerly the Deposit Insurance Corporation of Ontario).

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Account #:							
Sub Account #:		Account Type:					
Signature Instructions:		ANY ONE TO SIGN		ALL TO SIGN		OTHER	
		If "OTHER", please sp	ecify:				
Note: Accounts ope	ened online throug	h www.alterna.ca can c	only be	set to "ANY ONE TO	SIGN'	"	
Name & Title (Mr. Mrs. Ms. Dr. etc.)			Pers	sonal Account # Signat		gnature	
Primary							
Joint #1							
Joint #2							
Joint #3							
·			Date:				
For Additional Accou	unts						
Account #:		l					
Sub Account #:		Account Type:		I			
Signature Instruction	ons:	ANY ONE TO SIGN		ALL TO SIGN		OTHER	
		If "OTHER", please spe	ecify:				
Note: Accounts ope	ned online throug	h www.alterna.ca can c	nly be	set to "ANY ONF TO	SIGN'	<i>''</i>	
			,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.0.1		
Name & Title (Mr.				onal Account #		nature	
Name & Title (Mr. I							
Primary							
Primary Joint #1							
Primary Joint #1 Joint #2				onal Account #			
Primary  Joint #1  Joint #2  Joint #3			Pers	onal Account #			
Primary  Joint #1  Joint #2  Joint #3  Account #:			Pers	onal Account #			
Primary  Joint #1  Joint #2  Joint #3  Account #:  Sub Account #:	Mrs. Ms. Dr. etc.)	Account Type:	Pers	onal Account #		nature	
Primary  Joint #1  Joint #2  Joint #3  Account #:	Mrs. Ms. Dr. etc.)	Account Type: ANY ONE TO SIGN	Pers	onal Account #			
Primary  Joint #1  Joint #2  Joint #3  Account #:  Sub Account #:  Signature Instruction	Mrs. Ms. Dr. etc.)	Account Type: ANY ONE TO SIGN If "OTHER", please spe	Pers Date	ALL TO SIGN	Sig	OTHER	
Primary  Joint #1  Joint #2  Joint #3  Account #:  Sub Account #:  Signature Instruction  Note: Accounts ope	ons:	Account Type: ANY ONE TO SIGN	Pers  Date	ALL TO SIGN	Sig Sign'	OTHER "	
Primary  Joint #1  Joint #2  Joint #3  Account #:  Sub Account #:  Signature Instruction  Note: Accounts open  Name & Title (Mr. 1)	ons:	Account Type: ANY ONE TO SIGN If "OTHER", please spe	Pers  Date	ALL TO SIGN	Sig Sign'	OTHER	
Primary  Joint #1  Joint #2  Joint #3  Account #:  Sub Account #:  Signature Instruction  Note: Accounts open  Name & Title (Mr. In  Primary	ons:	Account Type: ANY ONE TO SIGN If "OTHER", please spe	Pers  Date	ALL TO SIGN	Sig Sign'	OTHER "	
Primary  Joint #1  Joint #2  Joint #3  Account #:  Sub Account #:  Signature Instruction  Note: Accounts open  Name & Title (Mr. In  Primary  Joint #1	ons:	Account Type: ANY ONE TO SIGN If "OTHER", please spe	Pers  Date	ALL TO SIGN	Sig Sign'	OTHER "	
Primary Joint #1 Joint #2 Joint #3  Account #: Sub Account #: Signature Instruction  Note: Accounts open Name & Title (Mr. In Primary Joint #1 Joint #2	ons:	Account Type: ANY ONE TO SIGN If "OTHER", please spe	Pers  Date	ALL TO SIGN	Sig Sign'	OTHER "	
Primary  Joint #1  Joint #2  Joint #3  Account #:  Sub Account #:  Signature Instruction  Note: Accounts open  Name & Title (Mr. In  Primary  Joint #1	ons:	Account Type: ANY ONE TO SIGN If "OTHER", please spe	Pers  Date	ALL TO SIGN  Set to "ANY ONE TO onal Account #	Sig Sign'	OTHER "	

Fax: 1.866.267.1064 (toll free fax number) | Email: call 1.877.560.0100 to obtain a secure email address Mail to: Alterna Savings, 319 McRae Avenue, 2nd Floor, Ottawa, ON K1Z 0B9

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