



**External Bank Account Approval Form**  
Ph. 403.440.5186  
Fax. 403.440.8909

**Date Submitted:** \_\_\_\_\_

**Club Information**

Student Club: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Bank Information** (to be completed after approval is given)

Bank: \_\_\_\_\_

Account Name: \_\_\_\_\_

Account Number: \_\_\_\_\_

Signing Authorities on Account: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Requirements**

As a club with an external bank account, we agree to:

- 1) Provide monthly financial statements to the Clubs Coordinator
- 2) Provide proof of deposit of event proceeds within seven (7) days of the event
- 3) Provide clarification on any bank transactions, as requested

We understand that these requirements are in place to reduce liability for the club, club members, and the SAMRU. Failure to meet these requirements will result in disciplinary action in accordance with the clubs policy and procedures.

**Club Executive Authorization**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Position: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Position: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Position: \_\_\_\_\_

For Internal Use Only

Approval Date: \_\_\_\_\_ Approved By: \_\_\_\_\_

*The personal information collected on this form will be used to administer and manage SAMRU's programs and services, and to maintain SAMRU's records. This information will be protected by the provisions of the Personal Information and Protection Act and can be reviewed during normal business hours upon request. Information may be disclosed to third parties in order to meet specific contractual and legislative requirements required to deliver services that you have requested. We treat your personal information with care and respect, and use it to improve our services to you.*