



GUARDIAN ANGEL ACCOUNT



Cust. Code Membership No.

Account Name Account No.

Child's Name: Gender: Male Female
First Middle Last

Date of Birth -- (provide birth certificate) Caste: SC / ST General Religion

Guardian's Name Relationship with the Minor

Date of Birth --

Nature of guardianship: Natural By court order

Permanent Address

Present Address

.....

Pin Code: Tel (R) Pin Code: Mobile.....

Tel (Office) Extn Email ID:.....

- Documents to be submitted:
- 1) Passport Size Photos: 3 Photos of the Child applicant and 1 photo of the Guardian.
 - 2) Identity Proof of the Minor : Photo ID from the School/College.
 - 3) Age Proof of the Minor: Birth Certificate/Transfer Certificate.
 - 4) Identity Proof: Passport/PAN Card/Driving Licence/Govt. or Defence ID Card/Voter's ID Card of the Guardian.
 - 5) Address Proof: Telephone Bill/Electricity Bill/Credit Card Statement/any other bank Pass Book of the Guardian.

I Shall represent the above minor in all future transactions of any description in the above account until the said minor attains majority. I shall indemnify the bank against the claim of the above minor's for any transaction/withdrawal made by me in his/her account.

Signature of Guardian

Signature of Minor

NOMINATION FORM DA-1

I/We..... nominate the following person to whom in the event of my/ minor's death the amount of deposit, particulars whereof are given below, may be returned by The Guardian Souharda Sahakari Bank Niyamita..... Branch

Name	Address	Relationship with depositor	Age

Place :

Date :

Signature (s)/ Thumb Impression (s)
of Depositor (s)

Introduction by School

Name..... Address.....
.....

Place:

Date:

Signature of the Introducer

Declaration by Applicant (s)

I/We have read both the pages in the application form. I/We agree to comply with and be bound by RBI rules and Bank's rules and regulations and terms and conditions regarding the conduct of the account. I/We have received a copy and read and understood/has been explained to me/us, the terms and conditions including minimum balance rules, charges etc. related to GAA. The Guardian Souharda Sahakari Bank Niyamita and undertake to abide by the said rules I/We also acknowledge that the Bank may from time to time change the same. I/We also authorize the Bank to debit any charges in the account(s) related to the account(s) or the value added services. I/We agree and understand that the Bank reserves the right to reject any application or stop any of the services, without assigning any reason. I/We also agree to abide by the Banks rules relating to GAA proposed minimum balance of Rs.

Signature of Guardian and Minor

Form 60

Form of declaration to be filled by a person who does not have either a Permanent Account Number or General Index Registration Number and who makes payment in cash in respect of transaction specified in clause (a) to (h) of rule 114B

Full name and address of declarant

Particulars of transaction - Opening of account(s)

Amount of transaction

Are you assessed to tax? Yes No

If yes,

- i) Details of War/circle/Range where the last return of income was filed.
- ii) Reason for not having permanent Account Number/General Index Register Number

Details of documents being produced in support of address in column (1)

Verification

....., do hereby declare that what is stated above is true to the best of my knowledge and belief.

Verified today, the day of 20

Place:

Date:

Signature of the Declarant