

Community Support Account for Charities, Groups and Organisations Change of Details Form

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Please provide at least one other official authorised signatory to carry out transactions. **Existing 2nd contact*** Title Mr Mrs Other (Please specify) Ms Forename Surname New 2nd contact* Title* Mr Other (Please specify) Mrs Forename* Surname* Address* Home/Mobile Tel: Postcode* Email Your position in the group (chairman, treasurer etc) Membership number I confirm the details I have given are correct, that I am over 16 years old and that I will abide by the society rules. Signature Date **Existing 3rd contact** Title Mr Other (Please specify) Forename Surname **New 3rd contact** Other (Please specify) Title Mrs Forename Surname Address Postcode Home/Mobile Tel: **Email** Your position in the group (chairman, treasurer etc) Membership number I confirm the details I have given are correct, that I am over 16 years old and that I will abide by the society rules. Signature Date

To help you get the best from your Community Support Account Membership we'll provide 10 cards to enable your supporters to divert their points. Please specify if you'd like more _____ (Maximum of 5

To avoid delay please make sure you have completed all the mandatory fields and obtained signatures where necessary as we are unable to process incomplete application forms.

Please note it is the responsibility of the group members to ensure all the details we hold are up-to-date.

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