

Inter-Bank Giro



THE AMERICAN CLUB
10 CLAYMORE HILL, SINGAPORE 229573

Batch No: _____

GIRO APPLICATION FORM

PART 1: FOR APPLICANT'S COMPLETION

(Please fill in the spaces indicated with ✓. Incomplete forms may not be processed)

Date: ✓ _____	Name of Billing Organisation ("BO") ✓ THE AMERICAN CLUB _____					
To: My/Our Bank ("Bank") ✓ _____	Member Name: ✓ _____					
	Member Number (Sample Format - A1234): ✓ <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>					

- (a) I/We hereby instruct the Bank to process The American Club's instructions to debit my/our account.
 (b) The Bank is entitled to reject The American Club's debit instruction if my/our account does not have sufficient funds and charge me/us a fee for this. The Bank may also at discretion allow the debit even if this results in an overdraft on the account and impose charges accordingly.
 (c) This authorisation will remain in force until
 (i) the Bank's written notice is sent to my/our address last known to the Bank;
 (ii) upon the Bank's receipt of my/our written revocation; or
 (iii) upon the Bank's receipt of the notice of expiry from The American Club.

My/Our Name(s): ✓ _____	My/Our Contact (Tel/Fax) Number(s): ✓ _____
My/Our Account Number: ✓ _____	My/Our Company Stamp/Signature(s)/Thumbprint(s)*: ✓ _____

(As in Financial Institution's records)

PART 2: FOR THE AMERICAN CLUB'S COMPLETION

SWIFT BIC	The American Club's Account No.	Member Number																				
U O V B S G S G X X X	1 0 1 3 3 4 3 5 7 3	<table border="1" style="display: inline-table;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>																				
SWIFT BIC	Account No. To Be Debited																					
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PART 3: FOR FINANCIAL INSTITUTION'S COMPLETION

To: THE AMERICAN CLUB
10 Claymore Hill
Singapore 229573
Attention to: Accounts Dept

This Application is hereby REJECTED (Please tick ✓) for the following reason(s):

- | | |
|---|---|
| <input type="checkbox"/> Signature/thumbprint# differs from Financial Institution's records | <input type="checkbox"/> Wrong Account Number |
| <input type="checkbox"/> Signature/thumbprint# incomplete/unclear# | <input type="checkbox"/> Amendments not countersigned by customer |
| <input type="checkbox"/> Account operated by signature/thumbprint# | <input type="checkbox"/> Others: _____ |

Name of Approving Officer

Authorised Signature

Date

* For thumbprints, please go to the branch with your identification.

Please delete where inapplicable