

Date

## Child Account - Withdrawal Request

Use only for Child Accounts (under 16) within SBI UK

**This form must be completed by ALL trustees and completed at the Branch only.**

- I/we the Trustee/s confirm that:
  - I/we understand that the Child Account is arranged on a trust basis
  - I/we understand that we are acting as a Trustee of the account
  - I/we state that all of the withdrawal proceeds requested will be specifically used for the sole benefit of the child (named as the Beneficiary within the application)
- I/we the Trustees (if there are two Trustees, we will require both Trustees to complete the form):

### Trustee 1

Name

Address

  


Your signature(s) (please sign in front of the cashier)

Signed

### Trustee 1

Name

Address

  


Signed

Account in the name(s) of

  


Amount in words

  


Amount in figures

  


Amount in figures

Branch where the account is held

Account number

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Cash

£50 x .....	£	
£20 x .....	£	
£10 x .....	£	
£5 x .....	£	
£2 x .....	£	
£1 x .....	£	
50p x .....	£	
Total:		

### Bank use only

Confirmation signature has been checked

Withdrawal notice given where applicable

Details of identification taken (If applicable)