

Minors Saving Account

Request to withdraw funds by Nominated Person(s)

Cana Credit Union Ltd

Account Number _____

Minor's Name _____

I/we _____ hereby apply to withdraw

the sum of € _____ from the above mentioned account. Please issue a

cheque for this amount payable to _____.

I/we acknowledge that this money is the sole property of the above named minor and I/we undertake to hold the property on trust, and to apply this property, for the minor's sole benefit.

Signed _____ Nominated Person

Signed _____ Nominated Person