

KID'S SAVER ACCOUNT

Account Opening Application Form

This form should be filled by the parent / legal guardian on behalf of the child whom the account is opened for.

Please submit a Personal Information Form if you haven't already done so.

Have you (Parent / Legal Guardian) submitted the **Information Form for Personal Banking Customers?**

- Yes
- No (please fill the above mentioned form and submit to the Bank along with this form)

Please fill form in **CAPITAL LETTERS**

For Bank use only

Customer No:

Account No:

Currency:

CRM No:

SECTION A – CHILD'S DETAILS

Full Name

(as in ID Card/as in PP for Foreigners)

ID Card No.

(For Maldivians / Attach Copy)

ID Card Expiry

Passport No.

(For Foreigners / Attach Copy)

Passport Expiry

(For Foreigners / Attach Copy)

Date of Birth

Gender

 Male

 Female

SECTION B – PARENT / LEGAL GUARDIAN DETAILS

 Mr

 Ms

 Dr

 Others, please specify

Full Name

(as in ID Card/as in PP for Foreigners)

ID Card No.

(For Maldivians)

ID Card Expiry

Passport No.

(For Foreigners)

Passport Expiry

(For Foreigners)

Contact No:

Passphrase

Relationship to Child

(Attach Child's Birth Certificate Copy)

(For new customers and customers who have forgotten and wish to renew their passphrase write your own 4-8 character word. Passphrase will be used for identification purposes)

SECTION C – ACCOUNT DETAILS

	Account No. [1]	Account No. [2] Please also fill this column if you wish to open a 2nd account
Select currency	<input type="checkbox"/> MVR <input type="checkbox"/> USD	<input type="checkbox"/> MVR <input type="checkbox"/> USD
Specify deposit amount (Initial deposit required as per schedule of charges)	<input type="text"/>	<input type="text"/>
How deposit is paid	<input type="checkbox"/> Cash <input type="checkbox"/> Deduct from my bank account specified below: <input type="text"/>	<input type="checkbox"/> Cash <input type="checkbox"/> Deduct from my bank account specified below: <input type="text"/>

SIGNATURE:

Estimated volume of transactions	Deposits <input type="checkbox"/> Less than 15,000 <input type="checkbox"/> 15,000 to 30,000 <input type="checkbox"/> 30,000 to 50,000 <input type="checkbox"/> 50,000 to 200,000 <input type="checkbox"/> 200,000 to 500,000 <input type="checkbox"/> 500,000 to 1,000,000 <input type="checkbox"/> Over 1,000,000	Deposits <input type="checkbox"/> Less than 15,000 <input type="checkbox"/> 15,000 to 30,000 <input type="checkbox"/> 30,000 to 50,000 <input type="checkbox"/> 50,000 to 200,000 <input type="checkbox"/> 200,000 to 500,000 <input type="checkbox"/> 500,000 to 1,000,000 <input type="checkbox"/> Over 1,000,000
	Withdrawals <input type="checkbox"/> Less than 15,000 <input type="checkbox"/> 15,000 to 30,000 <input type="checkbox"/> 30,000 to 50,000 <input type="checkbox"/> 50,000 to 200,000 <input type="checkbox"/> 200,000 to 500,000 <input type="checkbox"/> 500,000 to 1,000,000 <input type="checkbox"/> Over 1,000,000	Withdrawals <input type="checkbox"/> Less than 15,000 <input type="checkbox"/> 15,000 to 30,000 <input type="checkbox"/> 30,000 to 50,000 <input type="checkbox"/> 50,000 to 200,000 <input type="checkbox"/> 200,000 to 500,000 <input type="checkbox"/> 500,000 to 1,000,000 <input type="checkbox"/> Over 1,000,000

Withdrawals and Transfers are limited to 1 transaction per month for purposes such as medical reasons, children's education etc. Necessary documents have to be presented for such withdrawals or transfers

SECTION C – ONLINE BANKING SERVICES

BML Internet Banking (View Only option) BML Internet Banking applications will be processed within 05 working days	Please provide parent/guardian's preferred e-mail address and personal / mobile number to send login credentials and passwords Mobile <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Mobile <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	Email <input type="text"/>	Email <input type="text"/>

Once your application is processed, we will send a temporary User ID to your mobile via SMS and a temporary Password to your E-mail address.

Preferred mode of OTP Delivery
 Email Mobile

DECLARATION

This declaration is made to Bank of Maldives Plc
 I (parent/legal guardian) hereby agree:

- That I have the legal right to open and operate this account on behalf of the child and have no legal hindrances in relation to this account.
- That the operation of the account and funds in the account shall only be utilized for the welfare of the child.
- To having read, understood and expressly assent to be bound by the Bank's Terms of Conditions, Maldives Internet Banking Terms & Conditions, and Maldives Mobile Banking Terms & Conditions as amended from time to time. A copy of these Terms and Conditions are available at www.bankofmaldives.com.mv.
- To be bound by the Bank's Schedule of Charges and Fees as amended from time to time. A copy of the Bank's Schedule of Charges and Fees are available at www.bankofmaldives.com.mv
- To pass account operating rights and authority to operate the account to the child whose information is provided in Section 1 of this form when the child turns 18 years of age and upon completion of the formalities to operate an account in Bank of Maldives without any additional approval from me.
- That my authority to operate this account will be ceased when the child whose information is provided in Section 1 of this form turns 18 years of age.
- To indemnify and hold harmless the Bank from any and all claims and actions arising from the opening and operating of this account.
- At any time to update the Bank for any change in information of the child to the Bank as soon as is practicable.

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 Signature Date

SIGNATURE INSTRUCTIONS

Use Signature provided with this Application Form and update existing account signatures, if any

Use Signature provided for Account Number

