

Date:

Place:

दि अकोला अर्बन को - ऑपरेटिव्ह बँक लि., अकोला THE AKOLA URBAN CO - OPERATIVE BANK LTD., AKOLA

(MULTISTATE SCHEDULED BANK)

Branch
Minor Declaration From
Minor's Details
Account No. :
Name of Minor :
Date of Birth: / /
Relationship
with Guardian : Son Daugther Other
Guardian's Details
Nature of : Natural By court order dated please affix a copy
Guardianships
Source : Self funds Minor funds
Guardian's name: Mr. / Mrs. / Ku.————————————————————————————————————
& Address :
Ph.: Office :
Residance:
Mobile No.:
I hereby declare that I Shall represent the said minor in all future transactions of any description in the above relationship until the said minor affains majority. I shall indemnify the bank against all the claims of above minor for any withdrawal / transation made by me in his / her account.

Guardian's Signature