

RS2 Early Childhood Service / Playgroup Bank Account Form



This form is to be used by **licensed services** to change a bank account or by **Playgroups** to establish or change a bank account. All Ministry of Education payments will be deposited into this account.

All sections must be completed. Two signatories are required to sign that the bank details are correct, and either:

- your **bank must stamp the form** to verify the account details, OR
- you must **attach a pre-printed deposit slip**

Completed forms should be returned to: **ECE Operational Funding, PO Box 1666, Wellington**

Early Childhood Service	
Name	<input type="text"/>
Ministry of Education Service Number	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
Telephone / Fax	Phone Number <input type="text"/>
	Fax Number <input type="text"/>
Funding Contact Person	<input type="text"/>

Reason for Change	
Why is this change being made: <i>(tick one only)</i>	
<input type="checkbox"/> Because the service/playgroup has changed its own bank account.	<input type="checkbox"/> Because the service has had a change of ownership.
<input type="checkbox"/> Because the service has joined or left an association, while retaining the same ownership.	<input type="checkbox"/> New Playgroup

GST Number	
Please provide your GST number - if you are not GST registered then write NIL. The GST Number is used for Ministry accounting requirements only.	<input type="text"/>

Verified Bank Account Details for Future Payments			
Attach a pre-printed deposit slip OR complete the following			
Bank	<input type="text"/>		Bank Stamp and Initial <input type="text"/>
Branch	<input type="text"/>		
Account Name	<input type="text"/>		
Account Number	<input type="text"/>	<input type="text"/>	
	Bank and Branch	Account	Suffix
To be certified by two signatories, one of whom must be the service provider contact/office bearer e.g. treasurer.			
Services with one signatory MUST write "sole signatory" in the second field			
Signatory One	Signature <input type="text"/> X	Name (block letters) <input type="text"/>	Position Held <input type="text"/>
Signatory Two	Signature <input type="text"/> X	Name (block letters) <input type="text"/>	Position Held <input type="text"/>

Office Use Only			
	Date	Initials	Checked
<input type="checkbox"/> Change/Add Bank Account – Playgroup ECD	Sent to Finance	<input type="text"/>	<input type="text"/>
	Sent to Regional Office	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Change/Add Bank Account – Licensed Service ECF	Sent to Finance	<input type="text"/>	<input type="text"/>
	Sent to Regional Office	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Change of Pay Unit	Entered into Profiles	<input type="text"/>	<input type="text"/>
	Sent to Regional Office	<input type="text"/>	<input type="text"/>