

FREEHOLD

ROYALTIES

EFT FORM

NEW

CHANGE

CANCEL

BENEFICIARY INFORMATION:

Beneficiary Name: _____

Address: _____

City: _____ Province: _____

Postal Code: _____ GST #: _____

BANKING INFORMATION (Please attach a VOID cheque or a pre-printed deposit slip):

Name of Canadian Financial Institution: _____

Address of Canadian Financial Institution: _____



Canadian Account Information:

Branch Transit Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Financial Institution Number	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Bank Account Number	<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"/>

REMITTANCE ADVICE:

Email address (REQUIRED): _____

Contact Name & Title: _____

Telephone: _____ Date: _____

Authorized Signature: _____

PRINT Authorized Signature: _____

ALL EFT SUBMISSIONS WILL BE VERIFIED BY A CONFIRMATION CALL BEFORE PROCESSING.
PLEASE RETURN THIS COMPLETED FORM BY EMAIL OR POST:

EMAIL: treasury@freeholdroyalties.com Subject Line: Attention EFT Signup	MAIL: Freehold Royalties - Attention: EFT Signup 1000, 517 - 10th Ave SW Calgary, AB T2R 0A8
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