

Instruction Form

Wakala Treasury Deposit

Need more information?



alrayanbank.co.uk

Returning this form

It is important that you complete this instruction form in full.
Please use **black ink** and **BLOCK CAPITALS**.

Section 1 Customer details

From: (customer name)

To:

Date:

Attention:

Al Rayan Bank PLC

D D M M Y Y Y Y

Treasury, Al Rayan Bank Office

I/we am/are interested in entering into a wakala transaction in accordance with the wakala treasury deposit account special conditions:

For an amount of £/ccy:

and for a period of:

Kindly send the deposit offer communication

Section 2 Additional information

Main contact person for the account:

Al Rayan Bank account number:

Primary contact number:

Secondary contact number:

Section 3 Declaration

I/We agree that my/our account is bound by the Al Rayan Bank Wakala Treasury Deposit Account special conditions and any other Al Rayan Bank applicable conditions, copies of which I/we have received, read and understood.

For and on behalf of: (customer name)

Signature:

Your signature must not go outside the box

Date:

D D M M Y Y Y Y

For office use only

Relationship Manager:

Branch code:

Profit rate quoted:

Print name:

Signature:

Al Rayan Bank PLC is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

Our firm reference number is 229148. Al Rayan Bank PLC is incorporated and registered in England and Wales. Registration No. 4483430.

Registered office: 44 Hans Crescent, Knightsbridge, London, SW1X 0LZ.