

# SIGNING AUTHORITY APPLICATION



*You're at home here.*

## Discovery Co-operative Ltd.

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### APPLICANT

DATE: \_\_\_\_\_

MEMBER # \_\_\_\_\_

NAME: \_\_\_\_\_

PHONE # \_\_\_\_\_

DEPARTMENTS USED FOR CHARGING: \_\_\_\_\_  
\_\_\_\_\_

IS A PURCHASE ORDER (PO) REQUIRED FOR EVERY PURCHASE? (PLEASE CIRCLE ONE) YES NO

CONTACT PERSON IN CASE WE ARE HAVING PROBLEM WITH THE ACCOUNT:

NAME: \_\_\_\_\_

PHONE#: \_\_\_\_\_

### PERSONS AUTHORIZED TO CHARGE ON ACCOUNT: (PLEASE PRINT)

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

MEMBER SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

IT IS YOUR RESPONSIBILITY TO KEEP YOUR ACCOUNT UPDATED  
PLEASE CONTACT DISCOVERY CO-OP FOR ANY CHANGES TO YOUR ACCOUNT