



## Individual's Membership Application Form

Date:

Membership confers rights and obligations under the Credit Union's Constitution, a copy of which you can obtain on request. **If you are under 18**, you only pay 20% of the subscription price for your member share. However, you authorise us to debit your account for the balance of the subscription price on your 18<sup>th</sup> birthday.

➤ <b>Your details</b>	
Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other <input type="checkbox"/>
First Name	<input type="text"/> Middle name <input type="text"/>
Surname	<input type="text"/> Date of Birth <input type="text"/> / <input type="text"/> / <input type="text"/>
<b>My residential address (mandatory)</b>	
Unit / Street No	<input type="text"/> Street Name <input type="text"/>
Suburb / Town	<input type="text"/> State <input type="text"/> Postcode <input type="text"/>
Mailing address if different from residential address above	
<input type="text"/>	
Email address: <input type="text"/>	
Home	<input type="text"/> Mobile <input type="text"/> Work <input type="text"/>
Tax File Number - please use this TFN for all my accounts with you <input type="text"/>	
➤ <b>Consent for Electronic Delivery of Statements &amp; Notices</b>	
Please use my email address:	
<ul style="list-style-type: none"> <li>■ to send me statements and notices for all my banking and loan accounts; or</li> <li>■ to tell me that they are available to view or download from your Internet Banking site.</li> </ul>	
I understand that:	
<ul style="list-style-type: none"> <li>■ you will stop posting me paper statements and notices</li> <li>■ I need to check my emails regularly</li> <li>■ I can revert to receiving paper statements and notices in the post at any time</li> </ul>	
➤ <b>Signature</b>	
<input type="text"/>	Date <input type="text"/>
➤ <b>Selecting Your Accounts and Access Facilities</b>	
<b>Choice of Account Types</b>	
<input type="checkbox"/> [name of account]	<input type="checkbox"/> [name of account]
<input type="checkbox"/> [name of account]	<input type="checkbox"/> [name of account]
<input type="checkbox"/> [name of account]	<input type="checkbox"/> [name of account]
<b>Choice of Access Facilities</b>	
<input type="checkbox"/> Redicard/VISA card	<input type="checkbox"/> Cheque Book
<input type="checkbox"/> Internet / Phone Banking	<input type="checkbox"/> Bpay

**Office Use Only:**

Membership Number: .....	Shares:      Full      Junior
Date of Admission to Membership: .....	

**Verification of Identity Details:**

Customer Identification Procedure – Individual carried out and document(s) produced were: ..... ..... .....	
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**Access Facilities Action List:**

	Redicard ordered
	VISA card ordered
	Cheque Book ordered
	Internet Banking / Phone banking activated

**Confirmation:**

..... Staff Member's Signature Operator No .....
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