

Application for Membership - Non-Shareholding

Member Details

Title Surname Date of Birth

Given Names

Residential Address Postcode

Postal Address Postcode

Telephone: Home Work Mobile

Email

Employer

Occupation yrs

Employer's Address

The following must be nominated for the privacy and security of your account:

Password (letters, numbers or a combination) Mother's Maiden Name

If you are to be attached as the signatory on another members transaction or savings account/s please specify their details and complete the Authority to Operate form.

Membership Name

Membership Number

Tax Information

Is Australia your sole tax residence? Yes No

(If No, please complete Self Certification Form)

While it is not compulsory to quote your tax file number, not quoting it may result in Withholding Tax being deducted from interest earned.

Tax File Number

Authority

Member Signature

Date

QBANK / Office Use Only
Customer Verification Completion

1. I have verified the following Member details: Name (mandatory); and one of
 Date of birth OR Residential address
2. by sighting the (tick one): original OR original certified copy
3. of (tick one): Drivers licence Passport Other Documents* - description of documents

*Must be an 'acceptable' document – refer to the **Membership Information Sheet**.

Note: Obtain a copy of the identification document/s.

4. Self Certification Form required? ('No' to sole tax residence or foreign address)

Confirmation

Taken by (print name and sign)

Date

Processed by (print name and sign)

Date

Membership Number

Membership Opening Confirmation (Banking Services to complete)

Completed by (print name and sign)

Date