

Member Number

Non-Personal/Business Membership Application

1. Membership Type (please tick ✓ the appropriate classification)

A	B		
<input type="checkbox"/> New <input type="checkbox"/> Change to Existing	<input type="checkbox"/> Registered Business Name <input type="checkbox"/> Domestic Company <input type="checkbox"/> Registered Superannuation Fund <input type="checkbox"/> ATO Regulated Self Managed Superannuation Fund	<input type="checkbox"/> Corporate/Family Trust <input type="checkbox"/> Charitable Trust <input type="checkbox"/> Incorporated Association <input type="checkbox"/> Unincorporated Association	<input type="checkbox"/> Partnership <input type="checkbox"/> Registered Co-operative

Name of membership
(See page 6 for correct naming guidelines)

2. Membership Eligibility

To be eligible for membership of EECU you must fall within the membership bond and at least one owner, director, employee of a company or beneficiary of the trust must already hold a personal membership with the Credit Union. In the event that the existing personal membership is closed or where the employee of a company ceases to be employed by them EECU would require the non-personal/business membership to be closed.

Existing or Related Member/s Provide details (eg. Member No./Member Name)

<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="text"/>
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3. Member Name (refer to naming guidelines on page 6)

Registered name	<input type="text"/>
Registered address (PO Box not acceptable)	<input type="text"/>
Postal address	<input type="text"/>
Trading name (if applicable)	<input type="text"/>
ACN or ABN	<input type="text"/>

4. Documents Required (please tick ✓ the appropriate box and provide the documents listed)

Note: a copy will be made and held by the Credit Union.

<input type="checkbox"/> Registered Business Name:	<input type="checkbox"/> Domestic Company:	<input type="checkbox"/> Corporate/Family Trust or Registered Superannuation Fund:	<input type="checkbox"/> ATO Regulated Self Managed Superannuation Fund:
Certificate of Registration; ABN	Certificate of Registration; Memorandum and Articles of Association/Constitution; Minutes and/or Letter of Authorisation; ACN/ABN	Trust Deed; Name and address of all trustee/s; Name of each beneficiary; Minutes and/or Letter of Authorisation; ACN/ABN	Trust Deed; Name and address of all trustee/s; Name of each beneficiary; Minutes and/or Letter of Authorisation; ACN/ABN

<input type="checkbox"/> Unincorporated/Incorporated Associations:	<input type="checkbox"/> Partnerships:	<input type="checkbox"/> Charitable Trust:
Certificate of Incorporation; Minutes and/or Letter of Authorisation; Constitution or Copy of Rules;	Copy of partnership agreement (if exists)	Copy of Australian Taxation Office letter granting tax exemption; Confirmation of status as registered charity

5. Option to Receive Annual Reports

EECU's annual report is made available each year at our website eeecu.com.au. It contains information on EECU's financial position and performance, how efficiently it is being managed and about any financial risks it may face. If you wish to receive a copy of the annual report please indicate by ticking one of the options below. You can change your choice at any time by notifying us in writing.

please send me an annual report by email.
 please send me an annual report by post. (photocopy only provided)

6. Authorised Signatories & Method of Operation

	Authorised Signatory 1	Authorised Signatory 2
Surname		
Given names		
Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr
Date of birth		
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
Home address (PO Box not acceptable)		
	Pcode	Pcode
Postal address		
	Pcode	Pcode
Work telephone		
Home telephone		
Mobile telephone		
Email address		
Employer/Occupation		
Any existing or related member/s		
	Authorised Signatory 3	Authorised Signatory 4
Surname		
Given names		
Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr
Date of birth		
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
Home address (PO Box not acceptable)		
	Pcode	Pcode
Postal address		
	Pcode	Pcode
Work telephone		
Home telephone		
Mobile telephone		
Email address		
Employer/Occupation		
Any existing or related member/s		

Method of Operation

One may sign All must sign Other Give details:

7. Proof of identity

EECU requires that proof of identity is provided before the membership can be accepted and products and services that you apply for be provided (refer table on the first page for identification documents required). All signatories associated with the membership may also be required to provide personal identification documents even if proof of identity has previously been supplied. Items such as your passport, birth certificate, driver's licence, employment identification cards, student identification cards, credit or debit cards and Medicare card are some examples of the documents that may be required. EECU staff will help you with this.

Signatory information which you provide in connection with this application will apply only to accounts nominated by you.

If you are not personally providing your personal identification at an EECU office a 'Certifier' form must be completed and supplied with 'Certified True Copies' of your identification documents. The 'Certifier' form can be obtained from EECU.

8. Privacy Statement, Consent and Declaration

I/we understand EECU will collect information including my full name, date of birth and residential address from me as required by the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth) and that it may take steps to verify the identification information it has collected. I/we consent to the collection, use, handling, disclosure and verification of information as required by the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth). I/we understand that if I/we provide incomplete or inaccurate information that EECU may not be able to provide the products or services that I/we are seeking. Other information we ask you to supply on and in connection with this application form is not required by law but we may not be able to grant your application if it is not supplied. The information will not be used or disclosed except for a purpose otherwise disclosed to, or authorised by, you. Subject to the Privacy Act 1988, you may access personal information that we hold about you at any time by asking us.

1. You agree that your personal information may be held and used by us to assess and process this application, maintain a record of your membership, comply with legislative and regulatory requirements, conduct market or customer satisfaction research, develop and identify products and services that may interest you and (unless you ask us not to) provide you with information about other products and services.

2. You agree that we may disclose your personal information to our agents; contractors (including Cuscal Limited); external advisers whom we engage from time to time to carry out or advise on our functions and activities; regulatory bodies; government agencies; law enforcement bodies and courts; and (unless you tell us not to) to Cuscal Limited and its subsidiaries and our related bodies corporate (if any) for the marketing of their products and services.

3. Notwithstanding anything else in this statement, you may, at any time, advise us that you do not wish to receive any direct marketing communication. You may do this by writing to us at Reply Paid 84350 Melbourne VIC 8060, by telephone on 1300 65 3328, or by facsimile on +61 3 9608 8305. By signing below you also acknowledge that you have received prior to signing this application the EECU Financial Services Guide and the General Information and Terms and Conditions booklet.

I/we do not wish to receive any direct marketing material from EECU.

9. Membership Declaration

I/we hereby apply for a share in the Credit Union to become a member of the Credit Union. I/we understand that on becoming a member I/we agree to the general terms and conditions and I am bound by the Credit Union's Constitution as governed by the Corporations Law, and as altered from time to time.

I/we submit with this application the full subscription price of \$10 for a share in the Credit Union. (Share issue does not apply to Registered Business Name memberships).

I/we declare all the information contained in this application to be true and correct.

I/we acknowledge that my/our signature/s on this application form signifies acceptance of EECU's Terms and Conditions. (If the Terms and Conditions have not been provided, please ask a staff member before signing this document).

I/we advise that in accordance with a resolution passed at a meeting of our Directors/Committee/Trustees on / / , we the persons whose signature appear on this form are authorised to open a membership and accounts with EECU and to nominate the person/s nominated in section 6 who will then have authority to operate the account's. I/we agree to pay all charges required by EECU, to be bound by EECU's constitution and the provision of the Banking Act and the Corporations Law.

(please circle)

Has the applicant for membership or any of the authorised signatories ever been refused accounts at another financial institution?

Yes / No

Signature

Authorised Signatory 1

Date / /

Authorised Signatory 2

Date / /

Authorised Signatory 3

Date / /

Authorised Signatory 4

Date / /

I/we understand that it is an offence under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth) to give false and misleading information.

10. Account Selection (please tick ✓ if you require)

An Access Plus (S1) account – your everyday at-call account, will be opened with your membership. Share capital will be deducted from the initial deposit. You can also open the following at-call savings accounts:

Cash Management (S9) account

Direct Saver (S10) account

11. Deposit Book (please tick ✓ if you require)

Deposit Book - please supply me with a deposit book to make deposits through the National Australia Bank (NAB) to my:

Access Plus (S1) account

Cash Management (S9) account

Deposit may be made through any branch of the NAB and are generally credited to your EECU account the next working day (a service fee will apply - refer to the Everyday banking Fees & Charges brochure).

12. Card Access

You can use either a Visa Debit card or rediCARD to access funds in your Access Plus (S1) account. Cards will only be issued in the name of the individual/s who are authorised signatories to the account. A separate card application form must be completed for each signatory who requires a card (also available at eeecu.com.au).

If a Visa Debit card is not approved a rediCARD may be issued.

13. Remote Access

EECU's Internet and Telephone banking facilities allow you to manage your everyday banking electronically at your convenience.

Please complete the separate Netlink/Telelink Registration form (also available at eeecu.com.au)

14. Credit Union Specimen Signature Card

Each signatory must sign

Account Name _____

Member Number

New account Variation to existing account

1	2
3	4

Signing Specification

- Anyone may sign
 All parties to sign
 Two to sign
 Other (specify below)



Authority effective from

15. Your Tax File Number *This section (13) is destroyed once your tax file number is recorded on your membership.*

Collection of tax file numbers is authorised, and its use and disclosure are strictly regulated, by the tax laws and the Privacy Act. Quotation is not compulsory but tax may be withheld from your interest if you do not quote your tax file number or claim an exemption. I authorise the application of the information to all accounts and investments in this membership, unless I notify the Credit Union otherwise.

Exemptions: For details about who is exempt contact the Australian Taxation Office. (Note: an Australian Company Number (ACN) is not acceptable for Tax File Number purposes.)

A business can quote their ABN instead of the tax file number to stop tax being withheld from interest.

Member's Tax File Number

Exemption

<input type="text"/>	<input type="text"/>
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If a TFN is not quoted, withholding tax will be deducted from interest earned if it exceeds the thresholds specified by the ATO.



Better Banking for the
ExxonMobil Community

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16. Membership Naming Guidelines

Type of membership	Correct form	Samples of incorrect form
Domestic Co. <i>Use company title, not abbreviations</i>	ABC Pty Ltd	ABC P/L ABC Co.
Registered Business Name <i>Use individual/signatory's name then trading as business name.</i>	John Citizen T/AS Citizen Consultants or, John and Mary Citizen T/AS Citizen Consultants	Citizen Consultants
Registered Superannuation Fund <i>Use the name of the trustee of the superannuation fund.</i>	Citizen Co Pty Ltd Superannuation Fund	Super Fund for Citizen Co
ATO Regulated Self Managed Superannuation Fund	Citizen Superannuation Fund	Citizen Super Mr Citizen
Incorporated/Unincorporated Association <i>Use the name of the association.</i>	XYZ Social Club	Social Club for XYZ
Partnership <i>Use the partners' personal names. Do not use the name of the partnership.</i>	Mr John Citizen and Mr Michael Smith T/AS Citizen & Smith Consultants	Citizen & Smith Consultants
Corporate/Family Trust <i>Name of the company must appear first.</i>	Citizen Co Pty Ltd Trust Account	Trust for Citizen P/L
Charitable Trust (Reg'd) <i>Include 'Charitable' in name.</i>	Citizen Charitable Trust	Citizen Trust

Office Use Only

Documents given to members	Version	Date	Operator
General Information & Terms and Conditions			
Interest Rate Brochure			
Fees and Charges Brochure			
Financial Services Guide (FSG)			
General Warning Advice (if required)			