

Account access application

Complete this application for a **rediCARD, Visa debit card, cheque book, deposit book or to set up periodical payments.**

- For a Visa debit card or a cheque book, a minimum of \$50 per fortnight must be credited to your S1 Everyday Account or S1 Everyday Pension Account.
- You can apply for both a Visa debit card and a rediCARD, except for Future Teachers where only one card is applicable.
- All cards and the Personal Identification Number (PIN) will be issued to each individual and sent separately by mail.
- If you are applying for a card on a joint account and the signing authority is both to sign, Visa debit cards or rediCARDS cannot be issued.
- For individual access to the account, complete the first account holder details only. For joint access to the account, complete both sections.

I/We are applying for access to my/our account under member number

First account holder

Personal details

Title Mr Mrs Ms Miss Other

First name Middle name

Surname Date of birth

Residential address (mandatory)

Unit/Floor/Street no Street

Suburb/Town

State Postcode

Mailing address (if the same as residential write 'as above')

Email address

Home phone Mobile phone

Work phone

Second account holder

Personal details

Title Mr Mrs Ms Miss Other

First name Middle name

Surname Date of birth

Residential address (mandatory)

Unit/Floor/Street no Street

Suburb/Town

State Postcode

Mailing address (if the same as residential write 'as above')

Email address

Home phone Mobile phone

Work phone

Contact person in case of emergency

In case of an emergency, I/we authorise Teachers Credit Union to contact:

Name of contact person

Relationship

Residential address

Unit/Floor/Street no Street

Suburb/Town State Postcode Phone

Select a card

rediCARD Visa debit card

The card and pin will be delivered to your mailing address.

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rediCARD Visa debit card

The card and pin will be delivered to your mailing address.

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Set up periodical payments

- 1.** Set up a periodical payment via BPAY, Electronic Funds Transfer (EFT) or transfer to another Teachers Credit Union account.

Commence: until

Please insert 'final date' or until 'further notice' if there is no end date.

From my/our S1 Account S2 Bill Paying Account

Amount \$

Each Week Fortnight Month
 Quarter Year Other

Please make my/our payment by:

BPAY Biller code
 Biller name
 Client reference number

EFT Bank name
 Branch
 Account name
 Account number
 BSB
 Reference

(optional, may be required by recipient)

Transfer to a Teachers Credit Union account

Member number

Account (savings/loan eg S1, L22)

Please note: You can also set up periodical payments yourself via internet banking.

- 2.** Set up a periodical payment via BPAY, Electronic Funds Transfer (EFT) or transfer to another Teachers Credit Union account.

Commence: until

Please insert 'final date' or until 'further notice' if there is no end date.

From my/our S1 Account S2 Bill Paying Account

Amount \$

Each Week Fortnight Month
 Quarter Year Other

Please make my/our payment by:

BPAY Biller code
 Biller name
 Client reference number

EFT Bank name
 Branch
 Account name
 Account number
 BSB
 Reference

(optional, may be required by recipient)

Transfer to a Teachers Credit Union account

Member number

Account (savings/loan eg S1, L22)

Please note: You can also set up periodical payments yourself via internet banking.

Apply for a cheque and deposit book

Cheque book

I/We wish to apply for a cheque book containing 25 cheques 50 cheques

Joint account authority to sign: Either party to sign cheques Both parties to sign cheques

Deposit book for use at National Australia Bank branches only. Please supply me/us with a deposit book

Please tick one of the following boxes

I/We have: Direct pay Direct credit Regular NAB deposits Regular Bank@Post™ deposits

Please sign here for all services selected

Signature first account holder Date

Signature second account holder Date

Refer to the Fees and charges brochure for details on fees and charges which may apply.

Please return this form

By mail to: Teachers Credit Union, Reply Paid 7501, Silverwater NSW 2128

By fax to: (02) 9704 8204

Please sign here for our cheque signatory verification

Signature first account holder Date

Signature second account holder Date