

# APPLICATION FOR ACCESS SERVICES

Please complete the appropriate section/s for a VISA Debit card, Redicard or Cheque Book

## PRIMARY MEMBER

Member Number

Title  Mr  Mrs  Miss  Ms D.O.B.

Surname  Given Name/s

Home Address

Work Address  Store #

Postal Address  Postcode

Mobile/Telephone #  Email Address

## JOINT MEMBER

Member Number

Title  Mr  Mrs  Miss  Ms D.O.B.

Surname  Given Name/s

Home Address

Work Address  Store #

Postal Address  Postcode

Mobile/Telephone #  Email Address

**NB - If you have a joint membership which requires you both to sign, you will NOT be eligible for this facility.**

## VISA DEBIT CARD/ REDICARD APPLICATION (Please tick ✓)

I/ We would like to apply for card access to operate my/our Access Account

Visa Debit Card or  Redicard

### DECLARATION

I/ We agree to be bound by the 'VISA Card/Redicard Conditions of Use'. I/We acknowledge that my/our cards and Personal Identification Numbers will be mailed separately to my/our home address. If applying for a VISA Debit Card/s to replace a Redicard/s, I/We understand that my/our Redicard/s will be cancelled upon activation of the Visa Debit Card/s. If a joint membership and two (2) cards are required, both signatories are required to sign below.

Signature  Date

Signature  Date

## PERSONAL CHEQUE BOOK APPLICATION (Please tick ✓)

When applying for a Cheque Book, you are also required to complete a Cheque Book Signatory Card. I/We would like to apply for a Member Cheque Book facility and request that it is attached to my/our

Access Account or  Budget Account

### DECLARATION

I/ We agree to be bound by the 'Cheque Book Conditions of Use'. I/We acknowledge that the name/s on the Cheque Book will be the same as the name on my/our home address. I/We state that the signatories below and on the enclosed Cheque Book Signatory Card are authorised signatories to sign cheques and Stop Payment Orders. In the case of a joint account which has been set up as 'both to sign', we understand that both signatures will be required to authorise payment or to stop payments

Signature  Date

Signature  Date

## OFFICE USE ONLY

Date received  Signature Verified By Op # and initials

Visa Access Card Approved/Declined  Op #  Ordered  Op # and initials

Redicard ordered  Offline limit to apply:  Yes  No \$

Mbr Cheque Book Approved/Declined  Op #  Ordered  Op # and initials