

Personal Membership Application

This form is to be completed by a person wishing to apply for Membership and subscribe for a membership share with Queensland Country Bank Limited (Queensland Country) (other than via the online Membership application process).

Customer Number				
Personal Details				
Surname	Title Date of Birth / /			
First Name	Middle Name/s			
Postal Address				
	Postcode			
Residential Address				
(if different from a bove)	Postcode			
Mobile Phone	Personal Email			
Work Phone	Work Email			
Home Phone				
Are you a Politically Exposed Person*? No Yes If yes, complete QCM 0034 *Politically Exposed Persons (PEPs) are defined as individuals who occupy a prominent public position or function in a government body or international organisation, both within and outside Australia. This definition also extends to their immediate family members and close associates. Are you an Australian Resident for tax purposes? No Yes For tax purposes are you a resident of any other country, including US Residents? No Yes If yes, complete QCM 0070 Self-Certification for an Individual – Overseas Residency for Tax Purposes				
Statement Delivery				
	provided by Internet Banking. If this is not suitable notify Queensland Country. ernet Banking, paper statements will be sent via post.			
Communication				
I will accept communication to the following email Personal Work To keep you informed, we will send direct marketing material to you about our products and services and those of our related entities. To opt out of receiving marketing material tick here.				
Tax File Number (TFN				
Collection of tax file numbers is authorised and its use and disclosure are strictly regulated by the tax laws and the Privacy Act. Whilst it is not compulsory to quote your tax file number, not quoting it may result in Withholding Tax being deduct ed from your interest. Do you wish to quote your TFN No Yes If yes, complete QCM 0003				
Privacy Statement an	d Consent			
be bound by the Cons I have received the Facility Conditions of	embership and an allotment of one (1) \$Nil Fee Membership share in Queensland Country. I agree to stitution of Queensland County as amended. APP Privacy Notification for Banking Customers, Financial Services Guide and Account and Access Use brochure. If I wish to receive notices of meetings or the Annual Report I will advise Queenslanding the Election to Receive form available at any Queensland Country branch.			
Signature	Date / /			
	g this form as the duly appointed representative of the person please include the power by which you are complete QCM 0062 Power of Attorney or Administrator Notice.			

Branch Use Only	√ when completed	Completed	/ /		
Member Pack	AML ID completed	Member loaded	TFN/exemption loaded		
Open SH account	Marketing opt out	Scan to FileBound			
New Account Checks					
Personal Savings & Transaction Accounts PIB		Fees & Charges brochure	Interest Rate Schedule		
Order card/s	Internet Banking	Phone Banking	Statement set up		