

Primary Account Holder

Member Number

Account Name

Residential Address

Suburb

State

Post Code

Postal Address

As above

Suburb

State

Post Code

Home Phone

Work Phone

Mobile

Email

Secondary Account Holder (if applicable)

Member Number

Account Name

Residential Address

Suburb

State

Post Code

Postal Address

As above

Suburb

State

Post Code

Home Phone

Work Phone

Mobile

Email

Open/Change Account/s (tick box if applicable)

I/We wish to open the following account(s) and/or make the following change (tick the appropriate box/s):

<input type="checkbox"/> Military Rewards	Individual	OR	Joint	Member No. _____
<input type="checkbox"/> Recruit Salary Saver	Individual	OR	Joint	Member No. _____
<input type="checkbox"/> Access	Individual	OR	Joint	Member No. _____
<input type="checkbox"/> Pension Access	Individual	OR	Joint	Member No. _____
<input type="checkbox"/> Military Kids	Individual	OR	Joint	Member No. _____
<input type="checkbox"/> Online Saver	Individual	OR	Joint	Member No. _____
<input type="checkbox"/> Christmas Club	Individual	OR	Joint	Member No. _____
<input type="checkbox"/> Offset Account	Individual	OR	Joint	Member No. _____
<input type="checkbox"/> DIY Super Saver - For self managed super fund members. For more information please contact 1300 13 23 28.				Loan Account No.(this offset account linked to) _____

Cents Gifting Program (complete for S18 Military Rewards Accounts only)

I/we would like to support (select one option only):

Legacy Mates4Mates RSL Life Care Soldier On Allocate my contribution equally

Authority To Operate (tick box if applicable)

I/We wish to add an Authority to Operate on this account. I/We have completed the relevant form.

Declaration and Signature

By signing this application form,

- ▶ I/We agree to our personal information being collected, used and shared in accordance with the Australian Military Bank Privacy Collection Notice and Privacy Policy available at australianmilitarybank.com.au/privacy.
- ▶ I/We have received, read and understood Australian Military Bank Account and Access Terms and Conditions, Fees and Charges Schedule, Target Market Determination and Financial Services Guide available at australianmilitarybank.com.au/discloseddocuments.
- ▶ I/We agree to our information being checked with the document issuer or official record holder via third party systems to confirm our identity.
- ▶ I/We agree to receive statements and other communications about our account/s electronically via email, SMS and/or digital banking. I/We understand we may request paper statements at any time, however fees and charges may be applicable as per the Fees and Charges Schedule.

Signature of Applicant(s)

Name of Applicant

Name of Second Applicant

Signature

Date

Signature

Date

*digital signatures accepted

*digital signatures accepted

How to submit completed form:

Email: service@australianmilitarybank.com.au | Post: PO Box H151, Australia Square NSW 1215
Visit: your local branch