



PULSE CREDIT UNION LTD

heart of the community



REGISTERED OFFICE
Level 6, 766 Elizabeth Street
Melbourne VIC 3000
G.P.O. Box 1107
Melbourne VIC 3001
T (03) 9347 9588
F (03) 9348 1475

ABN 35 087 651 670

APPLICATION FOR MEMBERSHIP AND SHARES
Company/Body Corporate/Club/Association

Membership Number [] Date []
Please accept this application to become a member of Pulse Credit Union Ltd and to be allotted one \$10.00 member share and submit with this application the full subscription price for the share in the Credit Union.
Membership confers rights and obligations under the Credit Union's Constitution, a copy of which you can obtain on request.
Entity Name [] ACN []
Registered office (mandatory)
Unit / Floor / Street No. [] Street Name []
Suburb / Town [] State [] Postcode []
Principal place of business if different from above
[] Office Phone []
Company's Authorisation to Open Account
The Board of Directors or Governing Committee of the entity resolved that:
1. the entity become a member of, and open an account with Pulse Credit Union;
2. the person(s) specified as signatories be authorised to sign on the entity's member's behalf on any of the entity's accounts with the Credit Union.
3. where there are 2 or more signatories, the account signing authority will be as follows:
[] Any One to Sign [] Any Two to Sign [] All parties to Sign
I confirm that this is a true copy of the resolution. I have disclosed details about the company's directors, beneficial owners and signatories as follows.
.....
Chair of the Board of Directors/Governing Committee
.....
Please print name
Access Facilities
[] Internet Banking [] Telephone Banking
[] Redicard (available only to "any one" signing authority) to operate on my/our [] Access Account (101)
Issue card to [] Signatory 1 [] Signatory 2
[] Signatory 3 [] Signatory 4
You will need to acknowledge receipt of Redicard and PIN to allow activation of the service.
[] Cheque book to operate on Access Account (101)
[] NAB deposit book
The name on the cheque book will be the same as the account name.



List Directors, Signatories & Beneficial Owners

Please list each beneficial owner (a person owning 25% or more of the entity), each director and each signatory to the account. A person can be any or all of these, for example, for a single shareholder/director pty limited company there will be only one person disclosed who will be ticked as the beneficial owner, a director and as a signatory.

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|------------------------------------|---|-------------------------------------|--------------------------------------|
| M/ship No: | <input type="text"/> | Email address | <input type="text"/> |
| Title | <input type="text"/> | Home Phone: | <input type="text"/> |
| Surname | <input type="text"/> | Daytime Phone: | <input type="text"/> |
| Given Names | <input type="text"/> | Mobile Phone: | <input type="text"/> |
| Drivers Licence Number | <input type="text"/> | Date of Birth | <input type="text"/> |
| Residential Address: | <input type="text"/> | | Post Code |
| Is this person | <input type="checkbox"/> a beneficial owner | <input type="checkbox"/> a director | <input type="checkbox"/> a signatory |
| Specimen Signature if a signatory: | <input type="text"/> | | |

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| Title | <input type="text"/> | Home Phone: | <input type="text"/> |
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| Residential Address: | <input type="text"/> | | Post Code |
| Is this person | <input type="checkbox"/> a beneficial owner | <input type="checkbox"/> a director | <input type="checkbox"/> a signatory |
| Specimen Signature if a signatory: | <input type="text"/> | | |

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