



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

Joint &/or Partnership Account Signing Authority

Please open a joint account in the following names or partnership name (if applicable):
Account Number

Partnership details (where applicable)

Please state Partnership Name or Registered Business Name (we need to the sight original or a copy of the Business name Registration Certificate)

ABN:
Mailing address:
Post Code

When opening a Partnership Joint Account, the signatories to this form confirm that the partners and the name of the partnership are as listed above and that the Credit Union already has details of the partners' addresses in their respective membership records.

Member 1:
Membership Number
Title
First Name
Surname
Signature

Member 2:
Membership Number
Title
First Name
Surname
Signature

Member 3:
Membership Number
Title
First Name
Surname
Signature

Member 4:	Membership Number
	Title First Name
	Surname
Signature	

Date

<input type="checkbox"/> Any One to Sign <input type="checkbox"/> All parties to sign <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Account Method of Operation:
---	--

ACCOUNTS

Please activate the following components of the Account and Access Facility: By opening an account or using an access facility you become bound by the Conditions of Use of the Account and Access Facility.

<input type="checkbox"/> Access Account (101)	<input type="checkbox"/> Savings Account (102)
<input type="checkbox"/> Deeming Account (108)	<input type="checkbox"/> Christmas Club (105)
<input type="checkbox"/> Cash Management Account (104)	<input type="checkbox"/> 30 Day Notice Account (106)
<input type="checkbox"/> 11am Call Account (111)	<input type="checkbox"/> Term Deposit Account (110)
<input type="checkbox"/> Other Special Purpose Savings Account (103) (107)	

ACCESS FACILITIES

<input type="checkbox"/> Internet Banking	<input type="checkbox"/> Telephone Banking
<input type="checkbox"/> Redicard (available only to "any one" signing authority to operate on my/our	<input type="checkbox"/> Access Account (101)
	<input type="checkbox"/> Deeming Account (108)
Issue card to <input type="checkbox"/> Member 1	<input type="checkbox"/> Member 2
<input type="checkbox"/> Member 3	<input type="checkbox"/> Member 4
You will need to acknowledge receipt of Redicard and PIN to allow activation of the service.	
<input type="checkbox"/> Cheque book to operate on our	<input type="checkbox"/> Access Account (101)
	<input type="checkbox"/> Deeming Account (108)
<input type="checkbox"/> NAB deposit book	
The name on the cheque book will be the same as the account name.	