

Mobile Phone

## Date:

## **Membership Application**

Applicant Details (1st Applicant)		
Applicant Details (1st Applicant)		
I'm an existing Woolworths group team member		
Woolworths Group Team		
Locality (e.g. store or site name)		
Employee Number(Required)		
I'm related to a member		
Name of Member		
Relationship To Member		
What's the purpose of your new account?		
What's the purpose of your new account?		
Access Facilities		
Internet Banking		
Personal Details (1st Applicant)		
Title		
First Name		
Last Name		
Date of Birth		
Gender		
Contact Details (1st Applicant)		
Home Phone		

Address Details (1st Applicant)		
Applicant Details (2nd Applicant)		
I'm an existing Woolworths group team member		
I'm related to a member		
What's the purpose of your new account?		

Personal Details (2nd Applicant)		
Title		
First Name		
Last Name		
Date of Birth		
Gender		
Contact Details (2nd Applicant)		
Home Phone		
Mobile Phone		
Work Phone		
Email Address		
Certify Tax		
Tax Identification Number		
Address Details (2nd Applicant)		
Unit No./ Apartment No. (Optional)		
Street Number		
Street Name		
Street Type		
Suburb/City		
State		
Postcode		
Political Declaration		
Are you a politically exposed person		

Identity Verification		
Driver License		
State		
License Number		
Medicare Card		
Medicare Card Number		
Reference Number		
Middle Name on Card		
Card Colour		
Valid To		
Australian Passport		
Passport Number		
International Passport		
Issuing Country		
Passport Number		