



Please email your completed form back to: applications@woolworthsteambank.com.au

MEMBERSHIP DETAILS

Are you an existing Woolworths Team Bank member?

Yes - Member number/s [] (Complete section A only)

No. (Complete section A, B & C)

A. TERM DEPOSIT DETAILS

I/We hereby apply to deposit with Woolworths Team Bank:

The sum of \$ [] (NB minimum deposit is \$2,000.)

for a fixed term of 3 [] 4 [] 6 [] 9 [] 12 [] 18 [] 24 [] months

Please arrange to have this amount transferred directly from my/our S [] Savings Account.

Please contact to arrange deposit, transfer or direct debit.

TERMS AND CONDITIONS

- Interest is calculated daily at the rate advertised for the term and paid annually on anniversary and on maturity of the investment.
The interest rate is fixed for the term of the deposit.
Withdrawal of this Term Deposit before the maturity date may be permitted under the following conditions:
1. 3, 6 and 9 month terms - the total deposit must be redeemed in full. Interest will be calculated on a daily basis, at the relevant current S1 'At Call' interest rate and paid for the number of days deposited.
2. For the terms of 12 months and over - an early withdrawal of 20% of the initial deposit may be made without penalty. If a withdrawal over 20% is required, conditions as outlined in (1) above for the 3, 6 and 9 months terms will apply.
This deposit is accepted at the discretion of the Woolworths Team Bank who retains the right to decline or accept the application subject to these terms and conditions.
A copy of our privacy notification and policy is available at www.woolworthsteambank.com.au/privacy-policy.

I/ We have read the above and agree to the terms and conditions and privacy notification and policy as outlined.

Signed [] Date []

Print Name []

Signed [] Date []

Print Name []

OFFICE USE ONLY

Date Received [] Term Deposit Number [] Rate []

Received By []

B. MEMBERSHIP APPLICATION

PERSONAL DETAILS

Proof of Identity

Under the Anti-Money Laundering and Counter-Terrorism Financing laws, you are required to produce proof of identity before your membership is accepted. Some acceptable forms of identification are a drivers licence or passport. Please attach proof of identity to this document or contact Woolworths Team Bank if unable to do so.

APPLICANT 1 - PRIMARY MEMBER

Title	Given Name(s)	Other Name(s)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Surname		
<input type="text"/>		
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other		
D.O.B.		
<input type="text"/>		
Residential Address		
<input type="text"/>		
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Postal Address <input type="checkbox"/> As above		
<input type="text"/>		
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Home Phone		
<input type="text"/>		
Work Phone		
<input type="text"/>		
Mobile		
<input type="text"/>		
Email		
<input type="text"/>		

APPLICANT 2 - SECONDARY MEMBER

Title	Given Name(s)	Other Name(s)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Surname		
<input type="text"/>		
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other		
D.O.B.		
<input type="text"/>		
Residential Address		
<input type="text"/>		
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Postal Address <input type="checkbox"/> As above		
<input type="text"/>		
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Home Phone		
<input type="text"/>		
Work Phone		
<input type="text"/>		
Mobile		
<input type="text"/>		
Email		
<input type="text"/>		

ELIGIBILITY FOR MEMBERSHIP (Please tick ✓)

I am an employee of Woolworths
Store name

I am an employee of one of the Woolworths Limited Group of Companies
 Company Store name/Location

I am related to Name of member Relationship to member

I have an affinity to Woolworths (e.g. Everyday Rewards member, contractor) Specify

ACCOUNT OPERATION METHOD (Please tick ✓)

Any One to Sign All Parties to Sign

Are you a Politically Exposed Person (PEP)?
Yes No

A Politically Exposed Person (PEP) is someone who performs important functions. For example:

- A high ranking member of the armed forces (top three senior levels of each service)
- Heads of state, government and cabinet ministers
- Senior government officials
- Senior executive of state-owned organisation

A PEP is also the immediate family member of a person referred to above, including spouse, defacto partner or child.

C. TAX FILE NUMBER

Collection of Tax File Number (TFN) information is authorised and regulated by tax laws and the Privacy Act. It is not an offence to choose not to quote your TFN. However, if your TFN is not quoted you may be charged Withholding Tax on the interest that you earn. If quoted, your TFN will automatically be applied to future accounts you open on this membership unless you instruct us otherwise.

		Tax resident of Australia		Tax resident of overseas country		Tax number if yes
		Yes	No	Yes	No	
Primary Member	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Secondary Member	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

I/ We apply for membership of Woolworths Team Bank, as part of the membership I/we agree to opening an Everyday Transaction account, and undertake to deposit the sum of \$1.00 for share capital, which is fully refundable in accordance with the Constitution should I/we close my/our membership.

I/ We agree to be bound by the 'Visa Conditions of Use' and all other terms and conditions applicable to the selected Accounts and Access facilities. I/ We acknowledge that my/our Cards and Personal Identification Numbers will be mailed to my/our residential address.

A copy of our privacy policy is available at www.woolworthsteambank.com.au/privacy-policy.

Signature Date

Signature Date



**Woolworths
Team Bank**

522-550 Wellington Road
Mulgrave VIC 3170
Phone: 1300 665 553
Fax: 03 9263 2866

1 Woolworths Way
Bella Vista NSW 2153
Phone: 1300 665 553
Fax: 02 8885 0337

info@woolworthsteambank.com.au