

# Child Membership Application Form



Membership confers rights and obligations under the Credit Union's Constitution, a copy of which you can obtain on request.

## Your Details

Mr  Mrs  Ms  Miss  Other

First Name  Middle Name

Surname  Date of birth  /  /

### MY RESIDENTIAL ADDRESS (MANDATORY)

Unit / Street no.  Street Name

Suburb  State  Postcode

Mailing address if different from residential address above

Email

Tax File Number please use this TFN for all my accounts with you

Home Ph  Mobile Ph  Work Ph

Do you or an immediate family member hold a Public Office position e.g. politician, senior SAMFS rank Yes  No

## Consent for Electronic Delivery of Statements & Notices

I consent to receiving communications in relation to any of products and services with Fire Service Credit Union by email, SMS, push notification or through the secure mail facility available within Internet Banking.

I understand that the effect of this consent is that paper documents may not be provided by

Fire Service Credit Union where an electronic alternative is available and that I must regularly check my electronic communications for documents.

I am aware that I can withdraw my consent to receive electronic communications at any time by contacting Fire Service Credit Union.

Yes  No

Statements will be available via Internet Banking by the 7th day of the month after your statement cycle

## Selecting Your Access Facilities

### CHOICE OF ACCESS FACILITIES

Visa card  Internet Banking

Member Access Code - Four digit access code for identification purposes

## Account(s) required

S1 Everyday  S12 Junior Firefighter  S \_\_\_\_ Other

Note: An \$12 Junior Firefighter Savings account is designated as a Child's account. All \$12 Junior Firefighter Savings accounts are closed when the Child reaches 18 years of age. No card access is available for \$12 Junior Firefighter Savings accounts.

## Membership Qualification

Fire Service Credit Union offer membership to Emergency Services Employees and their families and other approved persons as defined in the Constitution of the Credit Union.

As Fire Service Credit Union is a closed bond credit union, you must provide proof that you are a member of the Emergency Services (e.g. ID badge).

If you are not a member of the Emergency Services it is necessary for you to be introduced by a current Fire Service Credit Union member.

Reason For Opening Account

Emergency Services Employee  Yes  No

Employer

Please provide the following details of the referring member:

Name

Member number

Relationship

Signature

## Authorised adult (optional)

You acknowledge the Child is the Owner of the Membership and Account(s) and any credit funds are the property of the Child. An Adult who opens an Account for a Child under 12 is added as an Authorised signatory but the Account(s) will be 'two to sign' giving access to

Adults Name

Phone

Account information (including view only Internet Banking) but not for withdrawals until the Child's signature is registered. Once the Child's signature is registered you can agree together and sign jointly to change this, if you wish.

Adults Member Number

Email

### ACCESS METHODS:

#### INTERNET BANKING

Includes access via FSCU Mobile Banking app (once downloaded)

Note: Internet Banking automatically includes e-statements. I understand I can opt out of e-statements via Internet Banking. Daily Internet Banking transactions limits apply.

#### VISA DEBIT CARD

Card access only available for S1 accounts.

Visa Debit cards are available to members aged 14-18 years with parent acknowledgement. For a child under 14, please contact FSCU to discuss. Note: Activate Visa Debit Card and select PIN via Internet Banking or Mobile app.

I request Fire Service Credit Union Ltd to issue me with a Visa Debit card (subject to FSCU approval).

SIGNATURE

Date

 /  / 

## Applicant Signature

All applications for membership are subject to approval by the Board of Directors in accordance with the Credit Union rules.

All members of the Credit Union are required to hold one \$10.00 membership share in the Credit Union.

I acknowledge that I have received the General Terms and Conditions and agree to abide by these terms and conditions.

SIGNATURE

Date

 /  /

**OFFICE USE ONLY**

Membership number

Shares

Date of Admission to Membership

**VERIFICATION OF IDENTITY DETAILS**

Customer Identification Procedure

- Individual carried out and document(s) produced were:

**CONFIRMATION**

Staff Member's Signature

**DISCLOSURE DOCUMENTS PROVIDED AND LOGGED ON AP ACCESS**

Privacy Notice

Financial Services and Credit Guide

General Terms and Conditions

Complaints & Dispute Resolution Guide

**FACILITIES ORDERED/LOADED**

Visa Card

Internet Banking

Access code

**COMPLIANCE RISK CATEGORY**

Low  Medium  High