INDIVIDUAL'S MEMBERSHIP APPLICATION

OFFICE USE ONLY

☐ Non-Shareholding ☐ Shareholding

Account No

MEMBER NO

A. DETAILS ABOUT ME

PERSONAL DETAILS (Please print) Government legislation requires proof of identification before accepting membership

Title ☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Dr ☐ Other *Mandatory Fields

*Given Name Middle Name(s)

*Surname *Date of Birth / /

Gender ☐ Male ☐ Female Preferred Name

***RESIDENTIAL ADDRESS**

Unit/Street No Street Name

Suburb/Town State Postcode

Postal Address if different from above:

Unit/Street No Street Name or PO Box

Suburb/Town State Postcode

Home ( ) Mobile Work ( )

Preferred Contact ☐ Home ☐ Mobile ☐ Work Occupation

Email address

Please note: If you give us your email address, you agree to us using that address to communicate with you.

TAX FILE NUMBER

Collection of tax file numbers is authorised, and its use and disclosure are strictly regulated by the tax laws and the Privacy Act 1988 (Cth). Disclosure of your Tax File Number (TFN) is optional. If you do not disclose your TFN then withholding tax may be deducted from any interest paid to your accounts. If provided, your TFN will automatically be applied to future accounts you open on this membership unless you instruct us otherwise. For more information about the use of tax file numbers, phone your nearest Tax Office.

Tax File Number or TFN Exemption

☐ Pension/benefit recipient Pension/benefit type (e.g 'age')

☐ Non-resident ☐ Norfolk Island Territory resident

Are you known by any other names? ☐ No ☐ Yes – Disclosure Advice required

FEE EXEMPTION (Rebateable fees only)

☐ I wish to apply for the Fee Exemption Status (Disability Support Pension and Mobility Allowance Only)

☐ I confirm that I have provided all supporting documentation

HOW DID YOU FIND US?

We'd like to know why you are joining QTMB

☐ Family/Friend Recommendation ☐ Bad Experience With Previous Financial Institution ☐ Prefer Mutuals Over Big Banks

☐ Comprehensive Product Range ☐ QTMB Public Profile/Advertising ☐ Competitive Deposit Rates

☐ Competitive Loan Rates ☐ Joining Partner Who Is already a QTMB Member ☐ Competitive Fees

QT Mutual Bank Limited 454 St Paul's Terrace, Fortitude Valley, Qld 4006. PO Box 929, Fortitude Valley, Qld 4006.
Call 13 29 30, go to **qtmb.com.au** or visit one of our branches. Fax 07 3252 7053
ABN 83 087 651 054 AFSL/Australian credit licence 241195

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B. ACCOUNTS THAT I NEED

ACCOUNTS REQUIRED (Single owner accounts only)
Note: Separate forms will be required for joint accounts

Please ensure you have read the specific terms, conditions and disclosures relating to each account you have applied for before signing the declaration.

TRANSACTION ACCOUNTS

☐ Current account ☐ Pensioner Deeming account (Pensioner number must be provided above)

☐ Everyday account ☐ Cash Management

☐ MyAccount ☐ eSave account

SAVINGS ACCOUNTS (Current account will be required)

☐ Bonus Saver ☐ Christmas Club

ZEST FINANCIAL AND LIFESTYLE PROGRAM

Are you 50 years of age or over? Would you like to join the QTMB Zest Financial and Lifestyle Program? Please refer to our Zest brochure for full details.

☐ Yes, I would like to join and agree to pay the yearly fee.

C. ACCESS TO MY QTMB ACCOUNTS

ACCOUNT ACCESS OPTIONS

Please ensure you have read the specific terms, conditions and disclosures relating to each account access option you have applied for before signing the declaration.

I would like to apply for:

☐ Internet banking ☐ Mobile banking (only available with internet banking) ☐ Phone banking*

☐ SMS Registration** ☐ Security Token** (I agree to the fee for the device and monthly fee)

☐ Redicard*** ☐ Visa Debit card*** (aged 18+ only)

* To use phone banking you will need to select a Security Code. This code will be required for all automated and staff assisted phone banking. This code will be required for your first access to phone banking.

** For security purposes limits are set for internet transfers and BPAY. By purchasing a security token and paying a monthly fee, or registering for SMS One Time Password these limits are increased. Please read the specific terms, conditions and disclosures for this access option.

*** The issue of cards is subject to approval in accordance with QTMB policy. The card(s) will be automatically linked to your first Current account. You can change the linkage to other accounts by visiting a QTMB branch or calling our Contact Centre. The above card(s) do not provide access to credit unless limited to an overdraft.

Please nominate your 4 digit Security Code ☐ ☐ ☐ ☐

☐ Tick this box If you require an overdraft facility or more information about our loan products

☐ I would like to receive a NAB deposit book so I can deposit funds into my Current account at any National Australia Bank branch

☐ I would like to receive a cheque book (MEMQT018 and MEMQT019 required)

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D. DECLARATION AND CONSENT

APPLYING FOR MEMBERSHIP AND AGREEING TO BE BOUND

1. I apply to be a member of QT Mutual Bank Limited ABN 83 087 651 054 ('QTMB'). I authorise QTMB to deduct the share price of $10 from my account. I agree to be bound by QTMB's Constitution.
2. I acknowledge receipt of and agree that I have reviewed and read the relevant terms and conditions of the account(s) and access method(s) for each, including the Security Code, and agree to be bound by the terms and conditions for each set out in this Application form, the Financial Services Guide, the General Terms and Conditions and relevant Product Disclosure Statement for each and I agree to be bound to same. Further, I have been informed that fees and charges may apply to some products and services and I have received QTMB's Fees and Charges brochure and any further explanation before proceeding.
3. I understand that QTMB will collect personal information from me as required by Government legislation, including the Anti-Money Laundering and Counter Terrorism Financing Act 2006 and that it may take steps to verify the personal information it has collected. I consent to the collection, use, disclosure and verification of personal information collected and understand that in some circumstances QTMB may not be able to provide me with the products and services I am seeking if I provide inaccurate or incomplete information.
4. I agree to the terms and conditions of QTMB's Privacy Policy and to the collection and use of information about me as set out in QTMB's Privacy Policy.

SHAREHOLDERS' INFORMATION

5. Even though the information is posted on the QTMB website, I wish to receive an individual annual financial report about QTMB. I understand that if I have not indicated that I wish to receive annual financial reports at this stage, I may change my choice at any time by notifying QTMB in writing.

   ☐ No ☐ Yes

6. Even though notices of members' meetings are posted on the QTMB website, I wish to receive individual notices of the following:

   ☐ No – I don't want any meeting notices ☐ Yes – AGM and SGM notices ☐ Yes – AGM notices only

   If you have answered yes to one of the above and you would like to receive information about members' meetings by email, complete the following:

   ☐ Where available, I would like to receive meeting notices by email to my email address advised on page 1 of my application.

CONSENT FOR ELECTRONIC DELIVERY OF STATEMENTS AND NOTICES

7. When QTMB has the relevant facilities available:

   ☐ I would like to receive statements and notices electronically, and consent to electronic delivery of statements and notices*

   Please use my email address advised on page 1 of my application:
   - to send me statements and notices for all my banking and loan accounts; or
   - to tell me that they are available to view or download from QTMB's internet banking site.

   Once available I understand that:
   - You will stop posting me paper statements and notices
   - I need to check my emails regularly
   - I can go back to receiving paper statements and notices in the post at any time

   *QTMB will inform members when this facility becomes available.

INFORMATION ABOUT QTMB PRODUCTS AND SERVICES

☐ Tick this box if you do not wish to receive any information about products and services offered by QTMB and other entities who it has a relationship with.

Signature _____ Date ___ / ___ / ___

APPLICANT CHECKLIST

☐ Shares paid (if applicable)	☐ Internet banking	☐ SMS Registration
☐ TFN supplied	☐ Mobile banking	☐ Visa Debit Card
☐ Account(s) selected	☐ Phone banking	☐ Redicard
☐ Proof of Identity	☐ Security Token	☐ Terms, conditions and FSG/PDS

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E. IDENTIFYING ME (To be filled by Branch Staff)

To satisfy QTMB's obligations under the Anti-Money Laundering and Counter Terrorism Financing Act 2006, QTMB must verify an individual's identity prior to providing access to its products and services.

LIST A DOCUMENT (Primary photo ID)

Type of Document _____ Document No _____ Expiry Date ___/___/___

OR

LIST B DOCUMENT (Non-photo ID) AND **LIST C DOCUMENT (Non-photo ID)**

Type of Document _____ Type of Document _____

Document No _____ Document No _____

Date of Issue (if applicable) ___/___/___ Date of Issue (if applicable) ___/___/___

This is to certify that I have sighted the original copy of the documents listed above.

Staff Member Signature _____ Staff Member Name _____

Operator No _____ Branch _____ Date ___/___/___

Checking Officer Signature _____ Operator No _____

Operations Support Officer Signature _____ Operator No _____ Date ___/___/___

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