

**MEMBERSHIP APPLICATION -**  
Incorporated/Unincorporated Club or Association



NOTE: Identification documents to verify particulars of the Club or Association must be provided as requested before we can process your application for membership. Being a mutual organisation, you must establish membership with us before you can access products and services obtained from a third party.

**Identification Documentation Requirements**

- ASIC search
- If no ASIC search Rules or Constitution of the Association
- Minutes of a meeting of the Association, which include the name of the Association, and date of the meeting (minutes must be dated within the previous 12 months).

Membership Number:

**CLUB/ASSOCIATION DETAILS**

Club/Association Name:

Type of association:

- Incorporated
- Unincorporated

Date of Incorporation:  /  /  Incorporation Number:

ABN (if applicable):

ANZSIC Code:  Industry:

Registered Address:

Suburb:  State:  Post Code:

Postal Address:

Suburb:  State:  Post Code:

Principal place of business:

Suburb:  State:  Post Code:

Contact Numbers: Work  Mobile  Home

Email address:  Source of funds:

**EXECUTIVE COMMITTEE**

	Given Name	Middle Name	Surname
<b>Chairman/President</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Secretary/Public Officer</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Treasurer</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## BENEFICIAL OWNERS

a) Please provide details of any individual who directly or indirectly controls the organisation, including those entitled to 25% or more of the assets upon termination, voting rights of 25% or more or power to veto.

### Beneficial Owner 1

Full legal name:  Member/client Number:   
Address (PO Box not acceptable):   
Suburb:  State:  Post Code:  Date of birth:  /  /   
Contact Numbers: Work:  Mobile:  % of ownership:  %

### Beneficial Owner 2

Full legal name:  Member/client Number:   
Address (PO Box not acceptable):   
Suburb:  State:  Post Code:  Date of birth:  /  /   
Contact Numbers: Work:  Mobile:  % of ownership:  %

### Beneficial Owner 3

Full legal name:  Member/client Number:   
Address (PO Box not acceptable):   
Suburb:  State:  Post Code:  Date of birth:  /  /   
Contact Numbers: Work:  Mobile:  % of ownership:  %

### Beneficial Owner 4

Full legal name:  Member/client Number:   
Address (PO Box not acceptable):   
Suburb:  State:  Post Code:  Date of birth:  /  /   
Contact Numbers: Work:  Mobile:  % of ownership:  %

If there are more than four beneficial owners, please attach additional page(s)

b) This section is only required if the entity control details in the above section cannot be determined, Provide details of the Senior Managing Official(s) who make decisions affecting a substantial part of the business (e.g. Chairman, Secretary or Treasurer)

### Officer 1

Full legal name: \_\_\_\_\_ Position title: \_\_\_\_\_

### Officer 2

Full legal name: \_\_\_\_\_ Position title: \_\_\_\_\_

### Officer 3

Full legal name: \_\_\_\_\_ Position title: \_\_\_\_\_

### Officer 4

Full legal name: \_\_\_\_\_ Position title: \_\_\_\_\_

## ANNUAL REPORT & ANNUAL GENERAL MEETING NOTICES

As a member of SERVICE ONE Mutual Limited, you will receive notice papers regarding our Annual General Meeting. You can choose to receive annual reports about SERVICE ONE. They contain information on its financial position and performance, how efficiently it is being managed and about any financial risks it may face.

You are not obliged to complete this section but, if you do not respond we are not required to send copies of the annual reports to you. You can change your choice at any time by notifying us in writing. Your choice will remain a standing election until notice is received.

- Yes, I want you to send me annual financial reports.  
 No, I don't want you to send me annual financial reports

SERVICE ONE Mutual Limited ACN 095 848 598 (SERVICE ONE) is an agent of Bendigo and Adelaide Bank Limited (Bendigo Bank) ACN 068 049 178 AFSL/Australian Credit Licence 237879 in the distribution of SERVICE ONE Alliance Bank® branded products and services.

SERVICE ONE Alliance Bank® is a trade mark of Bendigo Bank.

Phone 1300 361 761 Post Locked Bag 1 DEAKIN ACT 2600 Email [support@serviceone.com.au](mailto:support@serviceone.com.au) Web [serviceone.com.au](http://serviceone.com.au)

## COMMON REPORTING STANDARD (CRS) – COMPLETION OF ALL QUESTIONS IS MANDATORY

- Are any individual applicants residents of any country other than Australia or US?  Yes – please complete the Foreign Tax Details form  No
- Is the Entity created in any other country other than Australia or US?  Yes – please complete the Foreign Tax Details form  No
- Is the Entity Account Holder a Passive Non-Financial Entity?  Yes – please complete the Foreign Tax Details form  No

## FOREIGN ACCOUNTS TAX COMPLIANCE ACT (FATCA) – COMPLETION OF ALL QUESTIONS IS MANDATORY

- Are any applicants Citizens or Residents of the US for Tax purposes?  Yes – please complete the Foreign Tax Details form  No
- Is the Entity created in the US, established under the laws of the US or a US taxpayer?  Yes – please complete the Foreign Tax Details form  No
- Is the Entity a Financial Institution?  Yes – please complete the Foreign Tax Details form  No
- Are the controlling persons of an Entity Citizens or Residents of the US for Tax Purposes?  Yes – please complete the Foreign Tax Details form  No

*For companies, trusts and partnerships a controlling person is an individual who is a shareholder, trustee, beneficiary, settlor or partner AND who owns 25% or more of the Entity, controls 25% or more of the voting rights including a power of veto, or holds the position of senior managing official of the Entity. For associations and co-operatives a controlling person is also an individual who is entitled to 25% or more of the assets of the Entity upon dissolution.*

## PRIVACY DISCLOSURE

### 1. Collection of your personal information

We, SERVICE ONE Mutual Limited, acting as an agent for Bendigo and Adelaide Bank Limited (“Bendigo”), collect your personal information to assess your application, to provide you with the product or service that you have requested and to assess any future applications for products or services you may make to us or our related entities. Collection of some of this information is required by the Anti-Money Laundering and Counter-Terrorism Financing Act 2006. If you provide incomplete or incorrect information we may be unable to provide you with the product or service you are applying for.

### 2. Collection of personal information about third parties

We may need to collect personal information about a third party from you as part of this application. If we do this, you agree you will advise that person that we have collected their information, and that in most cases they can access and seek correction of the information we hold about them.

### 3. Use and disclosure of your personal information

We may use your personal information to perform our business functions (for example internal audit, operational risk, product development and planning). We may also use your personal information to confirm your details (for example contacting your employer to confirm your employment and income details).

We treat your personal information as confidential and only disclose it to others where necessary. For example, we usually disclose your information to organisations to whom we outsource functions such as mailing and printing houses, IT providers, our agents and specialist advisers such as accountants and solicitors. Other disclosures usually include joint account holders, account operators and account applicants, insurers, intermediaries and government authorities. Your information may also be disclosed to our related entities and joint venture partners where its confidentiality is maintained at all times.

### 4. Disclosure of personal information to overseas organisations

Some of the organisations we disclose your personal information to may be located overseas. Where an organisation is located overseas we will either take reasonable steps to ensure that it complies with Australian privacy laws or we will seek your consent to the disclosure.

### 5. Access to and correction of your personal information

In most cases you can gain access to and seek correction of your personal information. Should you wish to do so, or if you have any queries about your information, please contact us on 1300 361 761.

### 6. Direct Marketing

We may use your personal information to inform you about financial products and services that are related to those you have with us or other products and services we think you may be interested in. These may be products and services provided by us, our related entities or other entities we are associated with. If you do not wish to receive any marketing material from us you can mark the box below or call us on 1300 361 761.

I do not wish to receive marketing material from SERVICE ONE Mutual Limited

### 7. Privacy Policy

You should also read our Privacy Policy. Our Privacy Policy contains information about:

- how you can access and seek correction of your personal information;
- how you can complain about a breach of the privacy laws by us and how we will deal with a complaint;
- if we disclose personal information to overseas entities, and where practicable, which countries those recipients are located in. Our Privacy Policy is available on our website [serviceone.com.au](http://serviceone.com.au) or by telephoning 1300 361 761.

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## ASSOCIATION SIGNATORIES (Authority To Operate)

**NOTE: Any of the below signatories who are not member/clients of the Bank will need to complete the Application to Become a Signatory Form and be identified under AML/CTF requirements**

Any future updates to signatories will require the completion of the Authority To Operate Form

### Signatory 1

Full legal name:  Member/Client Number:   
Signature:

### Signatory 2

Full legal name:  Member/Client Number:   
Signature:

### Signatory 3

Full legal name:  Member/Client Number:   
Signature:

### Signatory 4

Full legal name:  Member/Client Number:   
Signature:

## HOW DID YOU HEAR ABOUT US?

Employer  Family member  Friend  Radio  Newspaper  Website  Other \_\_\_\_\_

Referred from/by \_\_\_\_\_

## ACKNOWLEDGEMENT & SIGNATURE

The Club/Association hereby applies for a share in SERVICE ONE Mutual Limited. The Club/Association agrees to be bound by the Rules and Constitution of SERVICE ONE Mutual Limited.

Note: Membership confers rights and obligations under the Constitution of SERVICE ONE Mutual Limited, a copy of which you may obtain upon request.

The Club/Association consents to the collection, use, handling, disclosure and verification of personal information as required by the Anti Money Laundering and Counter Terrorism Financing Act 2006 (Cth), and SERVICE ONE's Privacy Notice.

The details provided on this form are true and correct as at the date of signing.

The signatories listed below have authorisation to open the membership on behalf of the Club/Association and have supplied the required documentation.

I/We also acknowledge that upon signing this declaration I/we agree to abide by the relevant Terms and Conditions and accept full responsibility for transactions conducted on my/our account by me/us and additional signatories nominated by me/us.

Full Name: \_\_\_\_\_ Signature: \_\_\_\_\_ ..... / ..... / .....  
(Chief Officer/President) Date

Full Name: \_\_\_\_\_ Signature: \_\_\_\_\_ ..... / ..... / .....  
(Treasurer) Date

Full Name: \_\_\_\_\_ Signature: \_\_\_\_\_ ..... / ..... / .....  
(Secretary/other) Date

### Office Use Only (Please tick each box to indicate all actions have been completed)

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Certificate of Incorporation collected  | <input type="checkbox"/> TFN/ABN/ACN loaded        | <input type="checkbox"/> No duplicate membership held               |
| <input type="checkbox"/> Association Rules or Constitution collected   | <input type="checkbox"/> Signature/s loaded        | <input type="checkbox"/> All positions/occupations have been loaded |
| <input type="checkbox"/> Minutes of Meeting collected  | <input type="checkbox"/> Declined marketing loaded | <input type="checkbox"/> ANZSIC Code & nature of Business loaded    |
| <input type="checkbox"/> AML/CTF identification requirements met for all beneficial owners with 25% or more ownership or control |  |   |
| <input type="checkbox"/> AML Officer notified of PEP name and membership number (covers owners, beneficial owners & ATO's)       |  |   |

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