

Transaction & Savings Account Application Form

Date: _____

Membership No: _____

Membership Account Name: _____

Address: _____

Postcode: _____

I/We wish to open the following accounts and confirm that I/we will be bound by the terms and conditions applying to the accounts found in the Deposit Product Terms and Conditions. I/We confirm that I/we can access and view the Deposit Product Terms and Conditions, the Fees and Charges–Deposit Product & Account Access Facilities and Savings & Transaction Accounts Interest Rates brochures online at www.hunterunited.com.au

Premium Access: S

On Call Savings: S

XLR8: S

Deeming (VIP): S

Cash Management: S

e-ZYNET DIRECT: S

Hunter United Employees' Credit Union Ltd is the product issuer and principal.

Signature 1: _____

Print Name: _____

Signature 2: _____

Print Name: _____

Signature 3: _____

Print Name: _____

OFFICE USE ONLY - Accounts established/Signature(s) confirmed.

Signature of Staff Member: _____

Name of Staff Member: _____

Date: / /