Australian Defence Credit Union Limited
PO Box H151 Australia Square NSW 1215
Level 8, 1 York Street, Sydney NSW 2000
Phone Number: 1300 13 23 28
Fax Number: (02) 9240 4120

Branch

Application to Change / Open Additional Savings Accounts

Primary Account Holder

Member No _____

Title_____Given Names _____Surname _____

Residential Address _____P/code _____

Postal Address (if same as residential address write "as above")

_____P/code_____

Home Telephone No _____Work Telephone No _____

Mobile _____Email Address (please print) _____

Secondary Account Holder (if applicable)

Member No _____

Title _____Given Names _____Surname _____

Residential Address _____P/code _____

Postal Address (if same as residential address write "as above")

_____P/code_____

Home Telephone No _____Work Telephone No _____

Mobile _____Email Address (please print) _____

I/We wish to open the following account (s) and / or make the following change:

(**Tick appropriate box/s**):	**Individual**	**Joint**
☐ S1 Access Account	☐	☐ Member No _____
☐ S8 Christmas Account	☐	☐ Member No _____
☐ S9 Cash Management Account	☐	☐ Member No _____
☐ S20 Star Saver Direct Account	☐	☐ Member No _____
☐ S1 Children's Club Account		
☐ Super Saver (0 – 8 yrs)		
☐ Earth One (9 – 13 yrs)		
☐ Teen Plus (14 – 18 yrs)		

I/We enclose a: ☐Cheque (or cash) for $_____ or ☐ Net Pay/Allotment Authority
Or ☐ Please transfer $____ from my/our Account Number: _____ (S20 not available)

Authority to Operate (tick box if applicable)

☐ I/we wish to add an Authority to Operate on this account. I/we have completed the relevant form.

☐ I/We acknowledge that I/we have received, read and understood the Terms and Conditions of Australian Defence Credit Union's products and services.

Signature Primary Account Holder _____ Date ___/___/___

Signature Secondary Account Holder _____ Date ___/___/___

Please return this form by: **Mail: Australian Defence Credit Union PO Box H151**
Australia Square NSW 1215
Fax: (02) 9240 4120
Or over counter at any Branch