

Great Southern Bank electronic cards application form

USE THIS FORM TO: Request a new debit card.

1 YOUR DETAILS

Customer number: _____ Date of birth: _____ Preferred title: _____
Surname: _____
Given name/s: _____ Preferred name: _____
Home address: _____ Postcode: _____
Postal address: _____ Postcode: _____
(if different): _____
Home phone: _____ Work phone: _____ Mobile: _____
Preferred contact number: Home Work Mobile
Email Address: _____
PLEASE NOTE: You agree to us using this email address to communicate/provide notifications with/to you. Yes No

2 I WOULD LIKE TO APPLY FOR A GREAT SOUTHERN BANK

Visa Debit Card

Please issue my card on account number/s _____

3 ONLINE BANKING / ELECTRONIC DELIVERY OF STATEMENTS & NOTICES

I wish to register for: Online Banking Telebanker I consent to electronic delivery of statements and notices*

Please use my email address as above or _____

to tell me that eStatements and notices for all my banking and loan accounts are available to view or download from Great Southern Bank Online Banking.

* I understand that: - Great Southern Bank will stop posting me paper statements and notices
- I need to check my emails regularly
- I can revert to receiving paper statements and notices in the post at any time via Great Southern Bank Online Banking.

Great Southern Bank Visa Debit Card

I wish to apply for an electronic card. I agree to read and retain the conditions of use that are provided in the Terms & Conditions brochure, and acknowledge that my use of the card will indicate my acceptance of those conditions and any amendments to them.

EXISTING eftpos Debit Card HOLDERS PLEASE NOTE:

If issued with a Visa Debit Card, your current eftpos Debit Card will not be renewed upon expiry unless specifically requested.

I also understand that if an overdraft is linked to the Visa Debit Card, then all or some of the personal information contained in this application may be disclosed to Veda Advantage to be held by them on a credit information file.

Signature

Date

Once you have completed this form:

Drop it into a
Great Southern Bank branch



Mail it to:
Great Southern Bank
GPO BOX 100, Brisbane QLD 4001

We're here to help

If you need assistance completing this form, call us on **133 282** or drop into your local branch.

OFFICE USE ONLY**BRANCH CHECKLIST**

Terms & Conditions given to customer if not previously provided	Yes	No
Schedule of Fees given to customer	Yes	No

ONLINE BANKING / TELEBANKER**Staff Initials****ELECTRONIC DELIVERY OF STATEMENTS/NOTICES****Staff Initials**

a) Scripts read to customer

a) Registered for Online Banking

b) Email address / mobile phone number loaded

b) Email address loaded

b) Password / TAC given to customer

Ordered Visa

Initial

Date