



Membership Application Form

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 W www.lcu.com.au E info@lcu.com.au

ABN 77 087 650 217 AFSL/Australian Credit Licence 240807

Date		Member Number (Office use only)	
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Membership confers rights and obligations under the Credit Union's Constitution, a copy of which you can obtain on request

Personal Details (as per your identity documents)

Title		Home Phone	
Surname		Daytime Phone	
Given Names		Mobile Phone	
Also Known as (if applicable)		Date of Birth	
Residential Address (mandatory)	Post Code:		
Postal Address (if different)	Post Code:		
Email address			
How did you hear about LCU?	<input type="checkbox"/> Referral by friend/family/colleague _____ (please complete name) <input type="checkbox"/> Social Media <input type="checkbox"/> LCU Website <input type="checkbox"/> Physical Advertisement (brochure/signage)		

Consent for Electronic Delivery of Statements & Notices

Please use my email address:

- 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 your Internet Banking site.

I understand that:

- you will not be posting paper statements and notices to me
- I need to check my emails regularly
- I can revert to receiving paper statements and notices in the post at any time

Tax Residency

I certify that (please select one answer only):

I am a tax resident of Australia only (Go to the TFN part at the bottom of the page)

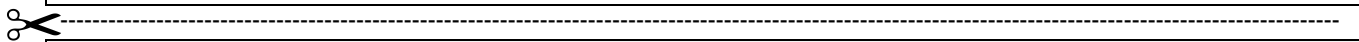
OR

I am a tax resident of each of the following foreign countries and am not a tax resident of any other foreign country:

Country	Taxpayer Identification Number (TIN) *

* The TIN is the taxpayer identification number used in the relevant country. If you do not have a TIN for a country you are a tax resident of please explain why, being either (A) the country does not issue TINs to residents or (B) other reason why you do not have a TIN (with explanation)

Country	Reason (A) or (B)	Explanation for (B)



Tax file Number (Quoting your tax file number is not compulsory but withholding tax may be deducted from your interest if you do not quote your number or your exemption. After input, this record will be destroyed)

Tax File number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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Or exempt from lodging a tax return. Please provide reason

Telephone Passcode (your telephone passcode helps us identify you when you call us) For security purposes telephone passcodes are to be quoted with the client number when making telephone enquiries and for limited transactions	
Please choose alpha and/or numeric	

Employment details (optional)			
Occupation		Name of employer	

Related Membership Numbers	
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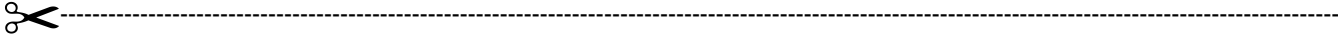
Selecting Your Accounts and Access Facilities			
Choice of Account Types:	<input type="checkbox"/> On Call (S1)	<input type="checkbox"/> e*Savers (S50)	<input type="checkbox"/> Intelligent Savers (S8)
	<input type="checkbox"/> Young & Free (S33) <small>(student account)</small>	<input type="checkbox"/> Savvy Saver (S34)	<input type="checkbox"/> Christmas club (S4)
Choice of Access Facilities:	<input type="checkbox"/> VISA Debit Card	<input type="checkbox"/> Internet Banking	

Membership declaration	
Application I hereby apply for membership of Laboratories Credit Union Limited (LCU) and undertake to pay \$10 to LCU for my membership share. I agree to be bound by the Constitution of LCU in place from time to time. A copy of which you can obtain on request.	
Acknowledgements and Declarations: I acknowledge and declare that:	
<ul style="list-style-type: none"> ➤ The names I have provided in this application are the only names by which I am known and I acknowledge that I cannot be provided with any products or services until my identity has been verified by LCU. ➤ My application for membership of LCU and for its products and services is subject to terms and conditions. ➤ LCU's Financial Services Guide (FSG), Conditions of Use - Accounts and Access Facility, Summary of Accounts & Availability of Access Facilities and Fees and Charges are available on LCU's website or they can be sent to me upon request. 	
LCU strongly recommends that I read each of the documents noted here and that if I do not accept the relevant terms and conditions I should not use the product or service.	
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Signature	Date

Office Use Only:

Access Facilities Action List:	
	Account Opened/Share Debited
	Welcome Letter Sent
	Visa Debit Card Ordered
	Internet Banking access
	eStatement register
	Email & Mobile Contact Details Verified
	Certifier's Credentials Verified

Confirmation:	
.....	
Staff Member's Signature	
Operator No	



The law requires us to verify your identity when you open an account, change your name or when you become a signatory to an account.

You are required to provide the following identification with your application:

1. One document from List A – Photographic identification OR
2. One document from List B and one from List C

If you are mailing a copy of your identification documents, photocopies will be accepted however they must be certified by a person on the certifier categories list. The certifier will need to sight the original documents by following the instructions in the certifier endorsement section below.

All signatories to the account must be identified, please supply identification documents for signatories who are not already members.

If you are presenting original documents at the LCU office then this certifier endorsement is not required

List A – Primary Photographic Identification	
ID must be issued in Australia and must confirm full name and date of birth.	<ul style="list-style-type: none"> • Passport (current or expired within 2 years) • Drivers licence (current) – front and back • Proof of age card (current)
List B – Primary Non-Photographic Identification	
ID must be issued in Australia and must confirm first name, surname and date of birth or address.	<ul style="list-style-type: none"> • Citizenship Certificate • Centerlink pensioner concession card (current)
List C – Secondary Identification	
ID must be issued in Australia and must confirm full name and date of birth.	<ul style="list-style-type: none"> • Council rates or utilities bill eg. water, phone, electricity etc (not more than 12 months old) • Tax assessment notice (not more than 12 months old) • Proof of Government benefit eg Austudy, family tax benefit (not more than 12 months old) - may NOT be used in conjunction with Centrelink Pension Concession Card in List B
Certifier Categories	
<ol style="list-style-type: none"> 1. Person who is enrolled on the roll of the Supreme Court of a state or territory, or the High Court of Australia, as a legal practitioner 2. Judge of a court 3. Magistrate 4. Chief executive officer of a Commonwealth court 5. Registrar or deputy registrar of a court 6. Justice of the peace/Commissioner for Declarations 7. Notary public 8. Police officer 9. Agent of the Australia Postal Corporation who is in charge of an office supplying postal services to the public 	<ol style="list-style-type: none"> 10. Permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public 11. Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955) 12. Officer with 2 or more continuous years of service with one or more financial institutions 13. Finance company officer with 2 or more continuous years of service with one or more finance companies 14. Officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more continuous years of service with one or more licensees 15. Member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants

To be completed by the certifier (if applicable)

Details of identification	
Full name of person being identified	
Type of documents certified	
Details of certifier	
Title	
Surname	
Given name(s)	
Occupation	
Category of certifier	
Certifier endorsement	
I have examined the original identification documents listed above	<input type="checkbox"/>
I have enclosed all certified copies of each document for LCU	<input type="checkbox"/>
I have endorsed each copy of the identification document with the following statement	<input type="checkbox"/>
This is to certify that this is a true copy of the original which I have sighted. Date, name, signed, title, registration number (if applicable). It is an offence under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 to give false and/or misleading information.	
Certifier Signature	Date: