



Membership Mandate

I wish to join the Police Credit Union and agree to conform to its Rules and amendments thereof and subscribe for at least one share.

My personal details

| | | | | | |
|---------------------|----------------------|---------------|-----------------------------|----------------------|----------------------|
| Title | <input type="text"/> | Date of Birth | <input type="text"/> | Membership Number | <input type="text"/> |
| Surname | <input type="text"/> | | | | |
| First names | <input type="text"/> | | | | |
| Residential address | <input type="text"/> | | Postal address if different | <input type="text"/> | |
| | <input type="text"/> | | | <input type="text"/> | |
| | <input type="text"/> | | | <input type="text"/> | |
| | <input type="text"/> | | | <input type="text"/> | |
| Email Work | <input type="text"/> | | | | |
| Email Home | <input type="text"/> | | | | |
| Work Phone | <input type="text"/> | Home Phone | <input type="text"/> | | |
| Private Mobile # | <input type="text"/> | Work Mobile # | <input type="text"/> | | |
| Your occupation | <input type="text"/> | | | | |

My eligibility for membership

| | | | | | | | | | | | | | |
|-------------------------------------|-----------------------------|-----------------------------------|-----------------------|--------------------------------------|-----------------------|-----------------------|--|----------|-----------------------|---------|--|--|--|
| Police | <input type="radio"/> | I am currently employed by Police | <input type="radio"/> | I am retired or resigned from Police | Your QID | <input type="text"/> | | | | | | | |
| NZDF | <input type="radio"/> | Army | <input type="radio"/> | Navy | <input type="radio"/> | Airforce | <input type="radio"/> | Civilian | <input type="radio"/> | Veteran | | | |
| Family | I am related to a: | | | | | | | | | | | | |
| | Relationship to member: | | (please select) | | | | | | | | | | |
| <input type="radio"/> | Credit union member | <input type="radio"/> | Parent | <input type="radio"/> | Child/Stepchild | <input type="radio"/> | Grandparent/Great Grandparent | | | | | | |
| <input type="radio"/> | NZ Police employee | <input type="radio"/> | Sibling | <input type="radio"/> | Aunty/Uncle | <input type="radio"/> | Grandchild/Great Grandchild | | | | | | |
| <input type="radio"/> | NZ Defence Force member | <input type="radio"/> | Niece/nephew | <input type="radio"/> | Whāngai | <input type="radio"/> | First Cousin | | | | | | |
| <input type="radio"/> | Emergency services employee | <input type="radio"/> | | | | | Current or former spouse, civil union partner, or de facto partner | | | | | | |
| Full name of related family member: | <input type="text"/> | | | | | | | | | | | | |

Electronic Banking

Please register me for **Internet Banking and Mobile Banking**. I understand that by signing this mandate I, as the primary account holder (above) will be registered for Electronic Banking and when I choose to activate these services I will abide by the Terms and Conditions. These Terms and Conditions can be accessed at policecu.org.nz. I will not disclose my password or PIN (Personal Identification Number) to any other party.

Debit Mastercard® application

I wish to be issued a Debit Mastercard® and agree to the Terms below

Debit Mastercard® Terms and Conditions

- I hereby apply for an Debit Mastercard® and a PIN (Personal Identification Number) to be issued to me to enable me to access my Credit Union accounts at authorised electronic banking terminals such as Automated Teller Machines (ATMs) and Point of Sale terminals (EFTPOS).
- I confirm that I will read, understand and agree to abide by the Police Credit Union's Cardholder Terms and Conditions of Use governing the use of the Debit Mastercard® at the time of issue and as amended from time to time.
- I confirm that I will read, understand and agree to abide by the Police Credit Union's Fees and Charges applicable for the issue and use of the Debit Mastercard® as per the Police Credit Union website, policecu.org.nz.
- I acknowledge that my signature on this application form signifies my unconditional acceptance of the above details and undertaking provided herein.
- I understand that my application is subject to confirmation and acceptance.
- Should my accounts become overdrawn without prior approval from the Police Credit Union due to the use of my Debit Mastercard®, I acknowledge that all shares and deposits held with the Police Credit Union in my name may be utilised (set off) towards payment of any debt incurred through my use of the Debit Mastercard®.

My financial details

What is the nature and purpose for opening an account with us today? (Tick one or more as applicable)

- Everyday banking Savings / investments Applying for a loan
 Access funds for unexpected expenses To receive money internationally
 Other (please specify)

My source of income

What is the source of your income and initial deposit? (Tick one or more as applicable)

- Salary or Wages Government paid pensions / benefits
 Investments / private superannuation Investment Trading
 Inheritance / gifts Winnings
 Asset Sales Business drawings / income
 Other (please specify)

My other income

Other than salary and wages, do you receive funds from any of the following industries? (Tick one or more as applicable)

- Antique dealer Weapon or firearms dealers or manufacturers Bullion or precious metal dealer
 Jeweller Pawn broking Casino or lottery / gambling operations
 Unregistered charities Company formation agent Provision of money remittance service
 Medicinal cannabis Virtual currencies e.g. bitcoin Provision of foreign exchange services

If yes please provide an explanation of the source of wealth or funds

Will you be receiving payments from overseas? Yes No

If yes please advise approximate amounts and sources

My taxation citizenship and residency

IRD Number Resident Tax Rate 10.5% 17.5% 30.0% 33.0% 39.0%

Country of Citizenship Are you a citizen of another country? Yes No

If yes - Please list all other countries of citizenship

Are you a tax resident of another country? Yes No
If yes Country Tax Number
Country Tax Number

Terms and Conditions:

Membership - Membership of the Police and Families Credit Union, (trading as the Police Credit Union) shall be open to persons being employees or former employees of the New Zealand Police, or the Police Credit Union, or the Police Service Organisations and/or their families including any such person aged 16 years or younger.

A member may withdraw from the Police Credit Union at any time, but 60 days' notice of withdrawal may be required. All amounts paid in on shares of any kind together with any interest credited thereto to the date thereof shall be paid to such withdrawing members as their funds become available and only after deducting therefrom any amounts due from such member to the Police Credit Union.

Accuracy of information - The Police Credit Union does not accept any responsibility or liability for the accuracy of the information given by you, or anyone acting on your behalf (other than us), in any instruction. You will be solely responsible for ensuring such information, including other parties' bank account numbers, is accurate.

Instructions to the Police Credit Union - You agree that the Police Credit Union may, at its sole discretion, accept instructions from you or people authorised to operate your account(s) by post, telephone, facsimile, email, text, electronic banking service or any other means in the course of our relationship, and you authorise the Police Credit Union to act on any such instructions.

You also authorise the Police Credit Union to carry out any transactions initiated by any means using your PIN (e.g. at an automatic teller machine), any of your Security Details, or by any other means agreed with you. The Police Credit Union may not take any further steps to verify such instructions or transactions. This authority applies regardless of any operating authorities that exist for an account and may not be withdrawn.

The Police Credit Union will exercise reasonable care and skill to ensure transactions are made as instructed. It is your responsibility to ensure there is enough money in your account at all times to ensure such transactions can be made.

You agree to maintain appropriate internal controls to ensure that unauthorised, forged or fraudulent instructions are not given to the Police Credit Union.

Set-Off -The Police Credit Union may at any time without notice, set-off, combine or apply any other credit balance of the member to meet the member's obligations to the Police Credit Union.

Liability - To the extent permitted by law you indemnify the Police Credit Union against all liability incurred by the Police Credit Union resulting from the Police Credit Union acting or omitting to act in accordance with a telephone or electronically generated instruction or any other instruction to the Police Credit Union regarding your account(s).

Information - You have the right to access the information held by the Police Credit Union and to correct any information that is wrong.

Disclosure of Information – You authorise the Police Credit Union to disclose information to selected third parties, including the New Zealand Police Association Inc and Police Welfare Fund Ltd in connection with any services provided, and in other instances where we are required by or authorised under the law to do so.

Complaints - You can send your complaint to the Police Credit Union via secure bank messaging through our Internet or Mobile Banking service or by mail to Police and Families Credit Union PO Box 12344, Wellington 6144 or DX SX11257 or phone 0800 429 000 or fax 04 499 2006 or email info@policecu.org.nz.

If you are still unhappy you can contact our independent dispute resolution provider Financial Services Complaints Limited (FSCL). This service is free to you. FSCL contact details are Financial Services Complaints Limited, PO Box 5967, Lambton Quay, Wellington 6145 or phone 0800 347 257 or fax 04 472 3728 or email info@fscl.org.nz or via their website fscl.org.nz.

Electronic Identity Verification:

You consent to us verifying all or part of your identity electronically against external data sources. We do this by providing your details securely to a third party which specialises in electronic identity verification. Your details will not be forwarded to any other third parties or used for any other purpose.

My identification

I include copies of the required identification documents as detailed in the "Identification Guide"

My Signing Authority - By signing this form I agree to be bound by the terms and conditions as detailed above and the General Terms and Conditions of The Police Credit Union which are available online at policecu.org.nz

I confirm that this authority is validly executed and binding on me

Signature

Date

Once completed please print, sign and return to the Police Credit Union, via email to info@policecu.org.nz or by mail to PO Box 12344, Wellington, 6144 or DX SX11257.