

## ATM APPLICATION FORM (Organisation)

ACCOUNT #

**PLEASE PRINT**

.....  
**ORGANISATION/COMPANY**

.....  
Address/P.O. Box

.....  
Phone #(s)

Email: .....

.....  
**Authorised Signature**

.....  
**Authorised Signature**

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### INTERNAL USE ONLY

Completed by: .....

Date card Requested: ...../...../.....

Card Number: **6 3 9 3 - 0 1** \_ \_ - \_ \_ \_ \_ - \_ \_ \_ \_

**CIF Number :**

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Card Prepared by: ..... Date Card Prepared: ...../...../.....

## FOR INTERNAL USE ONLY

### CREDIT UNION ACCOUNTS TO BE ACCESSED:

* ACCOUNT	APPROVED
REGULAR SAVINGS (D0)	
DEPOSIT (D1)	
HOLIDAY CLUB (D2)	
SUMMER CLUB (D3)	
CHEQUING (D8)	

\* Place a tick in the box next to the account to be activated.