



MasterCard Additional Cardholder Request

For any enquiries contact us on **1300 654 998** Mon to Fri 8am-8pm or Sat 8am-5pm (Melbourne time).
Mail to Account Origination, ME Bank, Reply Paid 1345, Melbourne VIC 8060
Fax to (03) 9605 6680
Visit mebank.com.au

Section 1 - Primary cardholder details

Title (Mr/Mrs/Miss/Ms/other)	Surname	Given name(s)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Card number (same as account number)		
<input type="text"/>		
Residential address (P.O. Box addresses are not acceptable)		
<input type="text"/>		
		State
		Postcode
Home phone	Work phone	Mobile
(<input type="text"/>) <input type="text"/>	(<input type="text"/>) <input type="text"/>	<input type="text"/>

Section 2 - Additional cardholder details

Title (Mr/Mrs/Miss/Ms/other)	Surname	Given name(s)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of birth	Name as you would prefer it to appear on the card (maximum 21 characters) e.g. JOHN M SMITH	
<input type="text"/>	<input type="text"/>	
Residential address (P.O. Box addresses are not acceptable)		
<input type="text"/>		
		State
		Postcode
Password (5 - 9 characters)*	Mother's maiden name	
<input type="text"/>	<input type="text"/>	
Home phone	Work phone	Mobile
(<input type="text"/>) <input type="text"/>	(<input type="text"/>) <input type="text"/>	<input type="text"/>

*New ME Bank customers - please nominate a password which we will request for identification purposes when you contact us.

If you are not an existing ME Bank customer we will need to verify your identity. We may do this electronically using reliable and independent data sources. We will contact you to request identification documents if we cannot verify your identity electronically.

Section 3 - Primary cardholder declaration

1. I declare that the information in this application is true and complete and I authorise ME Bank to verify this information.
2. I authorise ME Bank to issue an additional card to the person named in this application as the additional cardholder.
3. I understand that I am responsible for the use of the additional card and must pay for all transactions made by the additional cardholder, including any charges, until the additional card is returned to ME Bank.
4. I declare that the additional cardholder named in this application is aged 16 years or older.

Primary cardholder name	Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>

Section 4 - Additional cardholder declaration

1. I agree to comply with the Members Equity Bank MasterCard Terms and Conditions and the Members Equity Bank Electronic Access Terms and Conditions.
2. I understand that ME Bank is collecting my personal information in order to verify my identity as required under the Anti-Money Laundering and Counter Terrorism Financing Act 2006 (Cth), and for the purposes of enabling me to become an additional cardholder and begin using the additional card. I acknowledge that my personal information may be used and disclosed to third party service providers for these purposes and that without this information, ME Bank may not be able to provide me with an additional card.
3. I understand that I may request access to my personal information held by ME Bank and ask for it to be corrected if it is inaccurate. To do this I should phone 1300 654 998 during normal business hours or write to the Privacy Officer, ME Bank, GPO Box 1345, Melbourne VIC 3001.

Additional cardholder name	Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>