

Baptist Financial Services Australia Ltd

ABN 56 002 861 789 – AFSL 311062
("BFS" and "Baptist Financial Services")
A delegated body of Australian Baptist Ministries

Ph 1300 650 542

Email clients@bfs.org.au

Web www.bfs.org.au

PO Box 122 Epping NSW 1710



BFS Visa Prepaid Card Renewal or Variation

Personal and Card Details

Please complete this form, print and sign, before returning it to us at clients@bfs.org.au. Please tick your required choices and ensure your information includes the fields marked mandatory**.

Pursuant to the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth), BFS uses a Credit Reporting Agency (CRA) assessment to meet these regulatory obligations and each signatory's consent is required to undertake a CRA assessment.

Please renew my Card Number ending: XXXX XXXX XXXX _____ Client Number: _____

• I am authorised to provide the personal details presented and I consent to my information being checked, by a CRA, with the document issuer or official record holder for the purposes of confirming my identity** Yes

| | | | |
|------------------------|--------------------|----------------|---------|
| Title | Given Name | Middle Name(s) | Surname |
| | | | |
| Mother's Maiden Name** | Driver Licence No. | Date of Birth | |
| | | ___/___/___ | |

Residential address

| | | | | | |
|---------------|-----------------|-------------|--------|-------|----------|
| Property Name | Unit No / St No | Street Name | Suburb | State | Postcode |
| | / | | | | |

Postal address (only if different from residential address)

| | | | | | |
|---------------|-----------------|-------------|--------|-------|----------|
| Property Name | Unit No / St No | Street Name | Suburb | State | Postcode |
| | / | | | | |

Contact (Please include at least two contact details, such as a phone number an e-mail** and area codes)

| | | | | | |
|------------|-----|---------|-----|--------|--|
| Home Phone | () | Work Ph | () | Mobile | |
| Email** | | | | | |

Other than changing your details above, please advise how you wish to vary your Visa Prepaid Card:

| |
|--|
| |
|--|

Declaration and Signature

I declare that:

- All the information I have provided in this Renewal or Variation form is true, correct and complete;
- I have read, understand and accept the Financial Services Guide, Product Disclosure Statement, and the Terms and Conditions when I activate the card for the first time (located at <https://www.bfs.org.au/personal-visa-prepaid-card.html>);
- I consent to the collection, use and disclosure of personal information for the purposes shown in the Privacy Statement below;
- I consent to BFS and its representative to act as my agent in seeking access to my credit information held by credit reporting bodies and credit providers. This authority applies to inquiries made by BFS in connection with the provision of services to me by BFS in order to verify my personal information (including name, residential address and date of birth) for AML/CTF purposes; and
- I understand that the BFS Visa Prepaid Card is issued by Indue Limited ABN 97 087 822 464.

Authorised Person signature

| |
|-------------------|
| SIGN HERE |
| Date: ___/___/___ |

Office use only:

Client No: _____

Client ID Confirmed