Baptist Financial Services Australia Ltd

ABN 56 002 861 789 – AFSL 311062

RETURN THIS FORM TO:
Baptist Financial Services Australia Ltd ("BFS" and "Baptist Financial Services")

Ph - 1300 650 542 **Fax - 1300 784 699** **Email** clients@bfs.org.au **Web** **www.bfs.org.au**

NSW/ACT PO Box 122 Epping NSW 1710 **VIC/TAS** PO Box 377 Hawthorn VIC 3122

SA/NT PO Box 432 Unley SA 5061 **WA** PO Box 57 Burswood WA 6100

A delegated body of Australian Baptist Ministries

Account Application – Churches & Christian Organisations

How to invest

Please ensure that you have:

- Read and understood Financial Services Guide and Product and Services Information which explain our products and services, our privacy policy, complaints handling process, details the terms and conditions, as well as the key features, benefits and risks of using our non-cash payment products and debenture products; and
- Completed the relevant sections of this Application Form and the Associated Organisation Application.

Helpful hints for completing this application form:
Identification and Verification
If you do not have an existing account with Baptist Financial Services, then please arrange to provide the required identification document/s from LIST D on our Identification Lists form to confirm the identity of the proposed account holder in this application - also include the completed Certification Form when providing any copy/s of the certifiable documents specified.

Please sign in Step 7 & Step 9 in accordance with any Constitution, Partnership Agreement or Trust Deed of the proposed account holder. Please copy page 4 as necessary if additional authorised signatories are required for the account (Step 6).

Authorised signatories to the account, who have not previously been identified to BFS, will be identified by providing their personal details electronically to a credit reporting agency (CRA). BFS may require signatories to provide additional information and we will contact them if this is necessary. See further details on Page 7.

To open a personal non-business account in the name of individual person/s please use our form titled `**Account Application – Personal Account (Individuals Only)'**.

Baptist entities should use our form titled `**Account Application - Baptist Unions and Other Baptist Organisations (**

If you require a cheque account - an **induemoney *Cheq* account** is also available - contact us or download an application form from www.indue.bfs.org.au.

Please use BLOCK LETTERS and tick required choices

Office use only:
Client No: _____

Please indicate if you have an existing BFS Client Account in the same name and would like to use the same client number ☐

STEP 1. Entity Name

(We may need to abbreviate the name of the entity to a maximum of 30 characters)

Name your Account (Optional - If you would like to give your account a special name, then please write that name here, eg Building fund a/c)

Please tick type of entity		*Please supply certified copy/s of the documentation applicable to the entity type per below:*
Sole Trader	☐	Business Name registration (if any)
Partnership	☐	Partnership Deed and Business Name registration (if any)
Incorporated Association	☐	Incorporation Certificate and name and address of Chairman, Secretary, Treasurer or equivalent officers.
Unincorporated Association	☐	Rules, Constitution and/or Minutes of Meeting and name and address of Chairman, Secretary, Treasurer or equivalent officers.
Trust	☐	Trust Deed, Grant of Probate or other document establishing the trust.
Domestic Company	☐	ASIC return including name and address of directors / beneficial owners

Nature of business

Business location address (this item must be completed)

Suburb		State		Postcode	

Postal address (if different from business location address, otherwise leave blank)

Suburb		State		Postcode	

Contact Details (for phone/fax contacts include area code)

Home Phone		Work Phone		Mobile Ph	
Fax		Email			

Under the provisions of the income tax legislation, you are not required to provide your Tax File Number. However, if you don't, we are required to withhold tax at the highest marginal personal income tax rate plus Medicare Levy from any interest payments made.

									OR														

Tax File Number **ABN**

OR

Reasons for exemption from quoting

Please apply all tax file number/s and/or exemption/s to this and any additional account attached to the same client record ☐

STEP 2. Account Opening

I/we wish to open the following account(s). Please tick your choice(s)

☐ **Term Investment** Opening amount $ _____

Number of months ☐☐ at ☐.☐☐ **%** per annum with interest payable:

(Insert Term) (Insert interest rate)

Monthly ☐ 3 Monthly ☐ 6 Monthly ☐ Annually ☐ On Maturity ☐

☐ **Notice of Withdrawal Account (NOW Account)** Opening amount $ _____
(31 days notice required for withdrawals)

☐ **Savings Account** Opening amount $ _____

☐ **Online Savings Account** Opening amount $ _____
(Must also complete STEP 5 and attach separate Application/s for BFSOnline Access)

STEP 3. Your interest Payment Details

Please select one of the following:

☐ **Add interest to this account (compound)** or

☐ **Pay interest to Baptist Financial Services Account Number** _____ or

☐ **Pay interest to another financial institution account.** Details of the account are:

Account name			
Financial institution		Branch	
BSB number		Account number	

STEP 4. Account Operating Instructions

Please select one: If not completed, all authorised signatories must sign:

☐ Any one to sign ☐ All to sign ☐ Any two to sign

We accept that any one of the authorised signatories may endorse cheques, drafts or other instruments payable to the order of the account (or to BFS) and lodged for the credit of the account/s, to request a statement of the account/s and to obtain any information concerning the account/s generally.

STEP 5. Request Internet Access To Accounts Applied for in this Application via BFSOnline

If Internet Account Access is required, please select one of the following:

☐ Personal Internet account access for signatories to access account

Please arrange for each Applicant/s to complete and attach an Application for BFSOnline Access.

Or

☐ BFSOnline Business Administration Registration

BFSOnline Business provides the same functionality that is available to personal internet account access clients with the added ability to specifically tailor Internet account access to your needs. eg setup data entry users or view only users

Please complete and attach an Authority for BFSOnline Business Registration Form.

STEP 6. Authorised Signatories for the Account

The following is the list of authorised signatory/s for this account/s. The following signatories are authorised to act in respect of all accounts opened with this application.

SIGNATORY 1 - Items marked * must be completed

I consent to BFS verifying my identity electronically through a Credit Reporting Agency Yes ☐ No ☐

Title*	Given names*	Middle Name*	Surname*

Driver Licence No		Date of Birth*	/ /

Residential address*

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

Previous Address (*required if at above address for less than 2 years*)

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

Contact Details (for phone/fax contacts please include area code)

Home Phone		Work Phone		Mobile Ph	
Fax		Email			

Authorised Signatory 1 signature I acknowledge having read, understood and accepted the terms and conditions as contained in our 'Financial Services Guide' and 'Product and Services Information'.

SIGN HERE Date / /

SIGNATORY 2 - Items marked * must be completed

I consent to BFS verifying my identity electronically through a Credit Reporting Agency Yes ☐ No ☐

Title*	Given names*	Middle Name*	Surname*

Driver Licence No		Date of Birth*	/ /

Residential address*

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

Previous Address (*required if at above address for less than 2 years*)

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

Contact Details (for phone/fax contacts please include area code)

Home Phone		Work Phone		Mobile Ph	
Fax		Email			

Authorised Signatory 2 signature I acknowledge having read, understood and accepted the terms and conditions as contained in our 'Financial Services Guide' and 'Product and Services Information'.

SIGN HERE Date / /

SIGNATORY 3 - Items marked * must be completed

I consent to BFS verifying my identity electronically through a Credit Reporting Agency Yes ☐ No ☐

Title*	Given names*	Middle Name*	Surname*

Driver Licence No		Date of Birth*	/ /

Residential address*

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

Previous Address (*required if at above address for less than 2 years*)

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

Contact Details (for phone/fax contacts please include area code)

Home Phone		Work Phone		Mobile Ph	
Fax		Email			

Authorised Signatory 3 signature I acknowledge having read, understood and accepted the terms and conditions as contained in our 'Financial Services Guide' and 'Product and Services Information'.

SIGN HERE Date / /

(Make additional copies of this page if more signatories required)

SIGNATORY 4 - Items marked * must be completed

I consent to BFS verifying my identity electronically through a Credit Reporting Agency Yes ☐ No ☐

Title*	Given names*	Middle Name*	Surname*

Driver Licence No		Date of Birth*	/ /

Residential address*

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

Previous Address (*required if at above address for less than 2 years*)

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

Contact Details (for phone/fax contacts please include area code)

Home Phone		Work Phone		Mobile Ph	
Fax		Email			

Authorised Signatory 4 signature I acknowledge having read, understood and accepted the terms and conditions as contained in our 'Financial Services Guide' and 'Product and Services Information'.

SIGN HERE	Date / /

STEP 7. Deposit Required to Open Account

To open an account(s) a deposit must be made. Cheque/s must be payable to Baptist Financial Services. Cash can be used only if you are personally lodging this form over the counter at a BFS State office.

Please tick as appropriate: ☐ Cheque/s for $_____ attached. ☐ Cash lodged at BFS State Office $_____

If you wish to make the initial investment by electronic funds transfer, please fill out the details below:

Electronic funds transfer

Please complete and sign the Direct Debit Authority below to enable the opening deposit to be withdrawn from an account with another financial institution or with Baptist Financial Services. The Terms and Conditions for a Direct Debit Authority are contained in the Product and Services Information made available to you.

I/We authorise Baptist Financial Services User ID 148018 to debit the account detailed below through the bulk electronic clearing system with the amount of $ _____

Authorised signatory of account to be debited	Authorised signatory of account to be debited
SIGN HERE	SIGN HERE
Date	Date

☐ Baptist Financial Services account number _____ **Or**

☐ Other financial institution account details as set out below:

Account name			
Financial institution		Branch	
BSB number		Account number	

STEP 8. Phone/Email Password & Nominated Account

Please allow a `Phone/Email password' and/or a Nominated Account to be established on the account/s so that instructions in respect of the account/s can be given by phone, email or Secure Email by any **ONE** of the authorised signatories to the account.

Yes ☐ **No** ☐

The Terms and Conditions for a Phone/Email Password & Nominated Account and the use of Secure Email are contained in the Product Disclosure Statement - BFS Non Cash Payment Products made available to you. Any Phone/Email Password will apply to all accounts with the same Client number.

PHONE/EMAIL PASSWORD

(Your Phone/Email Password may contain numbers or characters and must be a minimum of 4 and a maximum of 8 characters long)

___ ___ ___ ___ ___ ___ ___ ___

NOMINATED ACCOUNT

(The amount of daily withdrawal transfers from an account to a Nominated Account is Unlimited)

Name of Account: _____

BSB Number: _____ Account Number: _____

Name of Bank: _____

Branch Address: _____

Phone/Email and Secure Email authorised transactions between BFS and/or induemoney *Cheq* accounts are unlimited. Where a Nominated Account has been established, the daily transfer limit for Phone/Email and Secure Email authorised transactions from each BFS debenture account into the Nominated Account with an external financial institution is unlimited. The current standard daily transfer limit for all other Phone/Email and Secure Email authorised transactions from each BFS debenture account to an external financial institution account is $2,000.00.

STEP 9. Sign Here

I/We apply to open the above-mentioned account(s) with Baptist Financial Services and I/we acknowledge having read, understood and accepted the terms and conditions as contained in our 'Financial Services Guide' and 'Product and Services Information'.

Authorised signatory	Authorised signatory
SIGN HERE	SIGN HERE
Date / /	Date / /

STEP 10. About BFS (us)

Baptist Financial Services Australia Ltd is a charity incorporated as a public company, and limited by guarantee.

BFS holds an Australian Financial Services Licence No 311062 issued by the Australian Securities and Investments Commission and is authorised to advise on and deal in a range of non cash payment products to retail and wholesale clients.

BFS provides transaction & product information advice, and deals, in relation to its range of debenture products to retail and wholesale clients, pursuant to the ASIC Regulatory Guide 87 and ASIC Class Order 02/184 exemption.

Our debenture products are designed for investors who wish to promote the charitable purposes of BFS and for whom the consideration of profit is not of primary relevance in the investment decision.

These debenture products are:

- Not subject to the normal requirements under the *Corporations Act 2001 (Cth)* to have a trust deed, to issue a Product Disclosure Statement, nor lodge such a document with the ASIC;
- Not examined or approved by the ASIC;
- In accordance with APRA Banking (Exemptions) Order No.96, not prudentially supervised by the Australian Prudential Regulations Authority (APRA); and
- Not subject to the depositor protection provisions of the *Banking Act 1959 (Cth)*.

BFS does not provide any personal advice (advice which takes into consideration one or more of your financial objectives, circumstances or needs) and you should take all reasonable steps to understand the products offered by BFS and that they are appropriate to your needs and objectives.

BFS was principally established to provide loans for the purposes of Baptist Unions and their associated Baptist Churches and Baptist ministries throughout Australia, to provide personal loans to Baptist Church Ministers, and to provide other loans to approved Christian income tax exempt charitable entities.

Funds not immediately required for loans are invested as set out in our Product Information Statement - Offer Document.
BFS also provides grants from its surpluses to the Baptist Unions and Associations in NSW & ACT, VIC, TAS, SA, NT & WA to support a range of Baptist ministry projects and to promote the interests of the Church.

Verification of Identity
The Anti-Money Laundering and Counter-Terrorism Financing Act 2006 requires Baptist Financial Services (BFS) to confirm and verify the identity of the entity and authorised signatories before:

- an account can be opened in the name of the business entity;
- the business entity is eligible to lodge funds into an account; or
- a signatory can become an authorised signatory to the business account.

Our Identification Lists and Certification Form will assist BFS to verify the entity (where required). These forms are either attached to this Application, can be downloaded from our website www.bfs.org.au, or can be obtained from any BFS State Office. If you do not provide the required information we may not be able to open your account/s.

Original/s or a certified copy of the necessary identification document/s from List D are required with the Certification Form, completed by a Certifier from 1 of the 15 categories listed, to verify that the copy/s are true copy/s of the original/s. In addition, you must also provide the 'Other Documents …' required from LIST D – this information does not need to be Certified.

If the Applicant is unable to provide the applicable documents listed, please contact Baptist Financial Services by phone on 1300 650 542.

To enable us to confirm and verify the identity of the authorised signatories, we may disclose personal information such as their name, date of birth, and address to a credit reporting agency (CRA) to obtain an assessment of whether that personal information matches information held by the CRA. The CRA may give us a report on that assessment and to do so may use personal information about the signatory and other individuals in their files. Alternative means of verifying signatories are available on request. If we are unable to verify any signatory's identity using information held by a CRA, we will provide them with a notice to this effect. They may take the opportunity to contact the CRA to update the information held by them. They must also arrange verification of their identity using an alternative method acceptable to BFS.

Privacy
If you are a signatory to an account, including an account applicant, we collect and use your information to substantiate your identity, authenticate your signature and enable us to provide investment services to the account holder and manage the account. If you are an Acceptable Referee, we may use your information to substantiate a client's or signatory's identity. We may also use your information to provide you with information about other products and services provided by BFS unless you have objected to this use.

We do not provide your information to any other organisation without your consent, other than to those organisations that provide administrative, client or other services as part of the operation of our business or as otherwise disclosed in this form. You may request access to information about you held by us by writing to one of our State Offices at an address shown on page 1 of this form. If at any time you provide the information about another person to us then you must first ensure that that person has read and understood this statement and separately consented to that information being used and disclosed by us for the above purposes.

If you would like more information then please request a brochure or give your State Office a call on 1300 650 542 (local call cost) or forward your request via our website www.bfs.org.au.