



Term Deposit Application MEMBER DETAILS: Membership Number: Member Name: Member Address: If the Term Deposit is to be set up as a Joint Account or with a Signatory attached, please advise their Member No: Joint Signatory TRANSACTION DETAILS: I/We wish to invest the sum of: Please transfer funds from my: Account: \$ Cheque: Cash: Minimum Deposit \$1,000 TOTAL TERM DEPOSIT: \$ Junior Members \$500 Period of Investment: months years Choose method of interest payment Choose method of principle payment on maturity Deposit to my Acc No Reinvest on Maturity Monthly Deposit to my Acc No On Maturity Deposit to my Acc No Deposit to my Acc No Annually Compound on Maturity Terms and Conditions apply. These are contained in our Conditions of Use Account & Access Facility brochure and our Term Deposit Account Product Disclosure Statement. Copies are available through our website, branch network or upon your phone request. Signature: Date: Signature: Date: **OFFICE USE ONLY:** All in One Mortgage: Cert No: Term Type: All in One #: Eff Date: Rate: Date: TFN Applied: Once you have completed this form: Email: mail@unitybank.com.au | Drop it into a branch | Mail it to PO Box K237 Haymarket NSW 1240

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If you need assistance completing this form, call us on 1300 36 2000, email: mail@unitybank.com.au

We are here to help

or drop into your local branch.