

What are your personal details?

Title Mr Mrs Ms Miss Other Member no.

First names Surname

I am: 50 or over OR Medically retired

Membership fee payment options

Please tick preferred payment option:

- Please deduct the pro-rata payment for my Edvest membership fee from my account on the above member number;
- OR Please deduct the pro-rata payment for my Edvest membership and future annual Edvest membership fees from the account on my other account Member no
- OR I have attached a cheque for the amount required.
- ▶ If paying by cheque it will need to be a cheque from **another financial institution** made payable to yourself.
 - ▶ Otherwise tick the box enabling us to deduct the fee directly from your account.
 - ▶ Call **13 12 21** for the pro-rata fee applicable in the month you join.

Nominate your Edvest membership to an account

Please tick one: Own account in my name Another account in joint names

Take advantage of your Edvest membership

Fill in your insurance details below and we will contact you with a discounted insurance quote and more information closer to your next renewal date.

Motor vehicle	Home	Contents
Renewal date <input type="text"/>	Renewal date <input type="text"/>	Renewal date <input type="text"/>
Current insurer <input type="text"/>	Current insurer <input type="text"/>	Current insurer <input type="text"/>

Please send me more information (including application forms) on: RediCredit Edvest term deposit Zurich Term Life Bridges

Other (please specify)




Please sign below in black pen only

- ▶ I authorise you to deduct my annual non-refundable Edvest membership fee from the above account in January each year until I withdraw this authority in writing. I will ensure I have the necessary funds in this account.
- ▶ I understand benefits cease when my fees are unpaid.
- ▶ I understand that Edvest benefits do not extend to Business or Corporate accounts.
- ▶ If you hold equivalent non-Edvest accounts on joining Edvest, you will need to apply to have them transferred to Edvest accounts.
- ▶ For members who are medically retired we may ask for supporting documentation
- ▶ Refer to the Fees and charges brochure for details on fees and charges.
- ▶ We reserve the right to terminate the Edvest program and associated benefits at any time. In such an event fees would be refunded on a pro-rata basis.

Signature Date

Office use only	Member no	<input type="text"/>
	Operator no	<input type="text"/>
	Date actioned	<input type="text"/>
	Sig verified by	<input type="text"/>

Returning this form

	Teachers Mutual Bank, Reply Paid 7501, Silverwater NSW 2128
	(02) 9704 8247
	members@tmbank.com.au