



# community access beneficiary application

Dnister Ukrainian Credit Co-operative Ltd

ABN 59 087 651 394 | AFSL / Australian Credit Licence 240673 | BSB 704 235

Head Office : 912 Mt Alexander Road, Essendon VIC 3040 | PO Box 279 | P 1800 353 041 | F (03) 9370 5361

www.dnister.com.au | admin@dnister.com.au

## member details

Member Number

## eligibility

To become a beneficiary, applicants must:

- be a member of Dnister Ukrainian Credit Co-operative
- have an Community Access account
- a non-profit charitable organisation
- have an ABN number or GST exempt status

## organisation details

Full name of organisation

Organisation type (please select)

Cultural       Youth       Religious  
 Education       Other     

Brief description of organisation's core purpose

Incorporated Association       Unincorporated Association

ABN

or GST exempt status

## address of principal place or administration or registered office

Address

Suburb  State  Postcode

Is the postal address the same as the principal place of business?  Yes  No

Phone  Mobile  Email

Website address

Facebook account name

## authorised person of the organisation

Please provide details of the authorised person who will be the primary contact

Title

Name  Member Number

Phone  Mobile  Email

Organisations position

## authorised person 2

Please provide details of the authorised person who will be the primary contact

Title

Name  Member Number

Phone  Mobile  Email

Organisations position

## beneficiary payment details

Beneficiary payments will be deposited annually. Please provide below your account details.

Account name  Account number

## declaration, consents & disclosures

I/We acknowledge having received and read the relevant Terms and Conditions relating to this account and further agree and accept to be bound by them. I/We agree to pay all charges required by Dnister in accordance with the Corporations Act and as detailed in Dnister's Fees and Charges schedule. If the account is overdrawn, liability to Dnister shall be joint and several.

Please forward the **completed and signed application to Dnister** by mail or via the fax number listed.  
If you have any queries or require further assistance, please contact our member services team.

### authorised person 1

Full name   
Signature   
Member no.  Dated

### authorised person 2

Full name   
Signature   
Member no.  Dated

The Board of Dnister Ukrainian Credit Co-operative or its delegated officers reserve the right to refuse any application to become a beneficiary.

### Office use only

CEO approval  Date

Processed by  Date

Updated RBL  Date