

# ● Internet Banking Registration Form



Please print clearly. ALL questions must be answered. If the application form is unclear, incomplete or details do not match our records, your Registration may be delayed.

**Personal Details** Existing Customer Number   New Customer 1

**APPLICANT NAME** Title  Mr.  Mrs.  Miss  Ms.  Dr.  Other \_\_\_\_\_  
Surname \_\_\_\_\_  
Given Name/s \_\_\_\_\_

**Contact Details**

Phone \_\_\_\_\_ Mobile 1. \_\_\_\_\_ Mobile 2. \_\_\_\_\_  
Email \_\_\_\_\_  
**RESIDENTIAL ADDRESS:** Street: \_\_\_\_\_  
Suburb \_\_\_\_\_ State \_\_\_\_\_ Post Code \_\_\_\_\_  
**POSTAL ADDRESS:** Street: \_\_\_\_\_  
Suburb \_\_\_\_\_ State \_\_\_\_\_ Post Code \_\_\_\_\_

**Internet Banking Details** 2

**INTERIM CUSTOMER PASSWORD:**

- Must be either 6, 7 or 8 characters long, and must contain at least 1 letter and 1 number.
- All interim passwords must be in lower case only.
- This is a **temporary password only**. You will be asked to select a new password when you first log in to internet banking.

I acknowledge that I have read the Supplementary Product Disclosure Statement (SPDS) and Terms and Conditions relating to MyLife MyFinance Internet Banking and agree to be bound by them. (Available on our website [www.mylifemyfinance.com.au](http://www.mylifemyfinance.com.au))

Signature \_\_\_\_\_  
Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

**Please return your completed registration form to:** [info@mylifemyfinance.com.au](mailto:info@mylifemyfinance.com.au)  
or to MyLife MyFinance, Level 2, 535 Bourke Street, Melbourne VIC 3000.

**OFFICE USE ONLY** Registered By.  Date