

Membership resignation

Important

To finalise resignation of your membership all of the services attached to the membership must be cancelled. If you have a Visa card, cheque book and/or payroll credits with Credit Union SA please complete the appropriate section(s) on this form.

Member number _____

Member name _____

Payroll/direct credit arrangements

If you have payroll or direct credit allocations to this membership you need to advise your paymaster that you are closing the membership.

Cheque account holders

List any outstanding transactions you may have on your cheque account.

Attached are my unused cheques.

Security packet

Does Credit Union SA hold a security packet on your behalf?

Yes No

Visa card holders

Your Visa card will be cancelled on receipt of this application. However, it will take 31 days to allow for outstanding transactions before the membership is closed.

- My Visa card(s) are attached.
- My Visa card(s) have been destroyed

Insurance policy holders

- Retain all my insurance policies on this membership.
- Cancel all my insurance policies on this membership.

Balance of funds

- Transfer to Credit Union SA
Account no. _____
- Transfer to another financial institution
Account No. _____
BSB No. _____
Account name _____

Reason for resignation

Please provide the main reason for your resignation from Credit Union SA:

I hereby wish to resign my membership with Credit Union SA Ltd. I direct Credit Union SA Ltd to close all accounts, and cancel all instructions and authorities currently held on this membership and effect the changes shown on this form from receipt of this notice.

Signature _____

Date _____

Office use only

Signature verified by: _____ Taken by: _____ Date / /

Office use only
Resignation checklist

Section 1 - completed by the branch

<i>Card type</i>	<i>Attached</i>	<i>Destroyed by staff</i>	<i>Not to hand</i>	
Visa debit card	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Direct debit closed
Visa credit card	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Auto transfers closed
Redicard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Safe custody packet taken - if applicable
				<input type="checkbox"/> Insurance dept notified - if applicable
				<input type="checkbox"/> Overdraft insurance cancelled if applicable

Completed by: _____

Section 2 - completed by Member Administration on receipt of form

- | | |
|---|---|
| <input type="checkbox"/> Direct credits closed | <input type="checkbox"/> Cards cancelled |
| <input type="checkbox"/> Internet banking closed | <input type="checkbox"/> Reason for closing loaded |
| <input type="checkbox"/> Phone banking closed | <input type="checkbox"/> Pending resignation pop-up loaded (for Visa cards) |
| <input type="checkbox"/> Cheque account facility closed | <input type="checkbox"/> Statement cycle changed to EOM |
| <input type="checkbox"/> Overdraft(s) closed | <input type="checkbox"/> PayID's closed |

Completed by: _____

Date: _____

Section 3 - completed by Member Administration on day of closure

- | | |
|---|--|
| <input type="checkbox"/> Pop-ups closed except those related to collection issues | <input type="checkbox"/> Membership closed |
| <input type="checkbox"/> eStatements removed (if applicable) | or <input type="checkbox"/> Class changed |
| <input type="checkbox"/> Share account closed | <input type="checkbox"/> Resignation letter sent
- doesn't apply to change of class |
| | <input type="checkbox"/> Relationship(s) - ie signatory, joint etc
RIM checked and closed if no account(s) relationships exist. |

Completed by: _____

Date: _____