

## PERSONAL AND BANKING DETAILS FORM

Please complete the following detail in full and email to: membership@universal.co.za.

Member name & surname	<input type="text"/>		
Name of Option	<input type="text"/>		
Membership number	<input type="text"/>	<input type="text"/>	<input type="text"/>
Income tax number	<input type="text"/>	<input type="text"/>	<input type="text"/>
Postal address	<input type="text"/>		
	<input type="text"/>	Postal code	<input type="text"/>
Physical address	<input type="text"/>		
	<input type="text"/>	Postal code	<input type="text"/>
Telephone details	Work <input type="text"/>	Cell <input type="text"/>	Home <input type="text"/>
Email address	<input type="text"/>		

### BANKING DETAILS

**NOTE:** Credit cards, international bank account details and transmission accounts are not accepted.

Name of account holder	<input type="text"/>	Branch code	<input type="text"/> - <input type="text"/> - <input type="text"/>
Name of bank	<input type="text"/>	Account number	<input type="text"/>
Type of account ( <i>please tick</i> )	Current <input type="checkbox"/>	Savings <input type="checkbox"/>	Effective date: <input type="text"/>

#### DISCLAIMER

It is the member's responsibility to advise the administrator in writing of any change in banking details. Neither the scheme nor its administrator shall be held liable should an incorrect account be credited under any circumstances.

Please tick the appropriate box for authority to access your bank account for:

Kindly submit copy of bank statement or letter from bank (not older than 3 months)

Contribution collections  Claim refunds  Member portion collection up to a maximum value of R500

\_\_\_\_\_  
Authorised signature/s

\_\_\_\_\_  
Date

\_\_\_\_\_  
Member signature  
(if different from authorised signature)

\_\_\_\_\_  
Date

