

Airpoints™ Debit Mastercard® and Transaction Account application

Westpac use only Authority no.]	Date / / /					
Individual/private) Joint O As trustee for O Tick if Schedule (of Extra Signatories attached						
Account number								
A. Transaction account customer	Name FIRST	MIDDLE	LAST					
name This tells us who owns the account	Name FIRST	MIDDLE	LAST					
	Name FIRST	MIDDLE						
	Where there is more than one account operate the account by themselves.	t holder, by signing this form	you agree that any one of the account owners ca					
B. Signatories This tells us who are the account owners and who are the signatories.		ther (please specify)	Date of birth DD / MM / YYY					
	Name FIRST	MIDDLE	LAST					
All account owners listed in section A must complete this section.	Relationship to customer (if not an account owner)							
If you have more than two authorised people, ask us for a schedule	Phone number HOME	MOBILE	WORK					
that has room for more people.	Email address	Occupation						
⁺ If you are using a NewZealand driver licence, please also	ID type	ID no.†	Expiry					
supply the card version number. If you are using	ID type	ID no. [†]	Expiry					
a passport, please supply the country of issue.	Home address NUMBER & STREET	SUBURB						
* This is for Resident Withholding Tax (RWT)	TOWN/CITY	POSTCODE						
calculation. If you don't provide a valid IRD	Postal address (if different) NUMBER & STR	REET SUBURB						
number, we will use the non-declaration rate of 45%. If you do provide	TOWN/CITY	POSTCODE						
an IRD number but don't tick an RWT rate, we will	IRD number IF KNOWN	^ Tax rate RWT^ (tick or	ne) () 10.5% () 17.5% () 30% () 33% () 39%					
use a default rate of 33%. ‡ If you tick "Yes", you are confirming your IRD	RWT exempt? [‡] Yes No)						
number is listed on the IRD RWT exemption	For Account Holders only (please comp	olete the following information)					
register. ^ You will be a US citizen	Are you a US citizen? [^] O Yes O No							
if you were born in the US or have acquired US citizenship, unless you	Main country of tax residency [~] THIS IS TH	E MAIN COUNTRY WHICH HAS T	HE RIGHT TO TAX YOUR WORLDWIDE INCOME					
have formally renounced your US citizenship	Additional country(s) of tax residency (if a	ny) LIST THE ADDITIONAL COUN	ITRY(S) OF WHICH YOU ARE A TAX RESIDENT					
~ The country listed will determine the tax	Foreign Tax Identification Number° (TIN)	YOUR IDENTIFICATION NUMBER F	FOR TAX PURPOSES IN A PARTICULAR COUNTRY					
rate applied to your products. Please contact your tax advisor if you	If you do not have a TIN, please select the reason: OTIN not issued by this country Ocuntry has not issued a TIN to me (e.g. I am under age)							
are unsure ° If you are a US citizen or tax resident, the	NOTE: We cannot open your account until we l	<u> </u>						
TIN section must be completed with your	Signature		Date DD / MM / YYY					
social security number or individual tax identification number.	By signing above you are bound by the Westpa	c Debit Mastercard Conditions of Us	e and Westpac's General Terms and Conditions.					
identification number.	Please enter your Airpoints" name and number* as it appears on your Airpoints membership. This must be in your name and will earn Airpoints on your card.							
	Name	Airpoints™ Mem	bership Number					
	Please enter your name as you would like it dis	played on your card						
	*Your Airpoints number will be printed on your							
	We are or may be required to verify the identit	wat the people listed in this form and	cortain other information provided in this form Please refer t					

We are, or may be, required to verify the identity of the people listed in this form and certain other information provided in this form. Ple Westpac's list of acceptable verification documentation available at **westpac.co.nz/AML**

B. Signatories (continued)	∩Mr ∩Mrs ∩Miss ∩Ms ∩Other (p	please specify)	Date of birth DD / MM / YY	(YY				
(continuou)	Name FIRST	MIDDLE	LAST					
	Relationship to customer (if not an account owner)						
	Phone number HOME	MOBILE	WORK					
	Email address	Occupation						
	ID type	ID no. [†]	Expiry					
	ID type	ID no.†	Expiry					
	Home address NUMBER & STREET	SUBURB						
	TOWN/CITY	POSTCODE						
	Postal address (if different) NUMBER & STREET	SUBURB						
	TOWN/CITY	POSTCODE						
	IRD number IF KNOWN RWT exempt? [‡] Yes No	^ Tax rate RWT^ (tick one) 🔵	10.5% 17.5% 30% 33% 39%	C				
	For Account Holders only (please complete f	the following information)						
	Are you a US citizen? ^{$^{\circ}$} Yes No	the following information)						
	Main country of tax residency THIS IS THE MA							
	Additional country(s) of tax residency (if any)							
	Foreign Tax Identification Number® (TIN) YOUR							
	If you do not have a TIN, please select the reaso	× ·	ountry a TIN to me (e.g. I am under age)					
	NOTE: We cannot open your account until we have re	eceived your TIN, unless one of the abo	ove reasons is applicable.					
	Signature		Date DD / MM / YY					
	By signing above you are bound by the Westpac Debi Please enter your Airpoints [™] name and number* as it your card.		estpac's General Terms and Conditions.	son				
	Name	Airpoints™ Membershi	p Number					
	Please enter your name as you would like it displayed	on vour card						
	*Your Airpoints number will be printed on your card a We are, or may be, required to verify the identity of th Westpac's list of acceptable verification documentation	and all Airpoints Dollars™ earned will b e people listed in this form and certain		rto				
C. Airpoints Debit	Yes, I'd like to order an Airpoints Debit Mastercard in conjunction with opening an eligible Westpac transaction account.							
Mastercard and Transaction		Please select the eligible Westpac Transaction account you would like:						
account details	Westpac Everyday							
	Easy Access	and an alternative second second	Transaction and Opmics Free breaking 1	la L				
	Standard transaction account fees apply. For ter online at westpac.co.nz or any Westpac brancl		nansaction and Service Fees prochure availa	ນເຍ				

D. Declaration	Guidance In this form: • We, us or Westpac – means We			Copies of these (as well as a Key Information brochure) will		
	 be sent to you with your new This additional information does not Agreement By signing this form, you request that Mastercard. Also, if you've selected to also open C, you request that we open that act You also: Agree to comply with: the Westpac Debit Mastercard 	g for the Airpoints Debit punt. If the parent or guardian ne applicant, you also means it makes sense. 'Your' has a prmation to bring certain t next to an icon like this: Key Information brochure) will card. It form part of your terms. at we issue you an Airpoints Debit a transaction account in section count.	Agree condit i i i compl c	be sent to you with your new card. They are also available as well as the Transaction and Service Tees brochure) at any Westpac branch or online at vestpac.co.nz. to comply with the Air New Zealand Airpoints terms and ions The Air New Zealand Airpoints terms and conditions are available at airnewzealand/airpoints-terms-and- conditions. You must be a member of Air New Zealand's Airpoints programme to earn Airpoints. m all information supplied in this form is true, correct and ete to the best of your knowledge f any information is not correct there can be serious consequences. These consequences might include us rejecting your application or you having liability to us or to RD. you'll notify us of any change in circumstances that would e the tax residency information you've provided.		
E. Acknowledgement	- the Westpac General Terms and		mumali	on a mostpactoniz/privacy of ask at dry Diditch.		
F. Parent/Guardian details If the applicant is between 15 and 18 years of age a	 You agree that we can make enquiries concerning your residency status. We'll only make these enquiries to obtain information that is relevant to: Your request to open an account or to your account generally Your Airpoints Debit Mastercard. We can make these enquiries of any person or entity that we reasonably consider can verify, or validly comment on your residency status. You authorise all persons or entities that we approach to provide us with the information that we request. By signing this form as a parent or guardian, you request that we issue an Airpoints Debit Mastercard to the applicant named above. Also, if you've selected to also open a transaction account in section C, you request that we open that account. You also: Agree to make sure the applicant understands the conditions of use that apply to their Airpoints Debit Mastercard. This includes the responsibilities they have, such as not telling anyone else their PIN Agree you won't make any claim against us for any losses the applicant suffers, now and in the future as a result of them not complying with the conditions of use that apply to their Airpoints Debit Mastercard. This does not apply if we had a reason to materially suspect that the instructions were fraudulent or negligent or are in breach of the conditions of use that apply to the applicant's Airpoints Debit Mastercard. This does not apply if we had a reason to materially suspect that the Airpoints Debit Mastercard can be used to make purchases online. 					
parent/guardian must complete this section and sign to accept the terms and conditions in person at a Westpac branch.						
	5	0.0				
	5	0.0				
	Understand that the Airpoints De	ebit Mastercard can be used to make		online.		
	Understand that the Airpoints De Parent/Guardian FIRST	ebit Mastercard can be used to make		online.		
	 Understand that the Airpoints Deparent/Guardian FIRST Date of birth DD / MM / YYYY 	ebit Mastercard can be used to make		online.		
	Understand that the Airpoints Deparent/Guardian FIRST Date of birth DD / MM / YYYY Postal address NUMBER AND S	ebit Mastercard can be used to make MIDDLE		online.		
	Understand that the Airpoints Deparent/Guardian FIRST Date of birth DD / MM / YYYY Postal address NUMBER AND S SUBURB	ebit Mastercard can be used to make MIDDLE TREET TOWN/CITY		online. LAST POSTCODE WORK		
Westpac card operati	Understand that the Airpoints Deparent/Guardian FIRST Date of birth DD / MM / YYYY Postal address NUMBER AND Second	ebit Mastercard can be used to make MIDDLE TREET TOWN/CITY		online. LAST POSTCODE WORK		
	Understand that the Airpoints Deparent/Guardian_FIRST Date of birth DD / MM / YYYY Postal address_NUMBER_AND Si SUBURB Phone number HOME Signature fons use only	ebit Mastercard can be used to make MIDDLE TREET TOWN/CITY		online. LAST POSTCODE WORK Date DD / MM / YYYY		
Credit Card Account Number	Understand that the Airpoints Deparent/Guardian_FIRST Date of birth DD / MM / YYYY Postal address_NUMBER_AND Si SUBURB Phone number HOME Signature fons use only	ebit Mastercard can be used to make MIDDLE TREET TOWN/CITY MOBILE	Package	online. LAST POSTCODE WORK Date DD / MM / YYYY		
Credit Card Account Number	Understand that the Airpoints Deparent/Guardian_FIRST Date of birth DD / MM / YYYY Postal address_NUMBER_AND Si SUBURB Phone number_HOME Signature ions use only	ebit Mastercard can be used to make MIDDLE TREET TOWN/CITY MOBILE CRS Nurr	Package	online. LAST POSTCODE WORK Date DD / MM / YYYY		
Credit Card Account Number	Understand that the Airpoints Deparent/Guardian_FIRST Date of birth DD / MM / YYYY Postal address_NUMBER_AND Si SUBURB Phone number_HOME Signature ions use only	ebit Mastercard can be used to make MIDDLE TREET TOWN/CITY MOBILE CRS Nurr Card Account Nun	Package	online. LAST POSTCODE WORK Date DD / MM / YYYY type type type		
Credit Card Account Number	Understand that the Airpoints Deparent/Guardian FIRST Date of birth DD / MM / YYYY Postal address NUMBER AND S SUBURB Phone number HOME Signature ions use only r	ebit Mastercard can be used to make MIDDLE TREET TOWN/CITY MOBILE CRS Nurr Card Account Nun Brar Bank stamp	Package	online. LAST POSTCODE WORK Date DD / MM / YYYY type type type		
Credit Card Account Number	Understand that the Airpoints Deparent/Guardian_FIRST Date of birth DD / MM / YYYY Postal address_NUMBER_AND Si SUBURB Phone number_HOME Signature ions use only	ebit Mastercard can be used to make MIDDLE TREET TOWN/CITY MOBILE CRS Nurr Card Account Nun Brar Bank stamp	Package	online. LAST POSTCODE WORK Date DD / MM / YYYY type type type		

It you have any questions or need help completing this, please call **0800 888 111.** Once completed, please take this together with your identification to your nearest Westparanch. Mastercard is a registered trademark of Mastercard International Incorporated.