

## **Dear Member**

The following details will be recorded on your membership data base and will be used to enable us to make payments from NCMC into your account and will assist in reducing the costs of processing, printing and posting cheques.

The information will not be used for any other purpose. When completed please either fax, email or post the completed form back to NCMC to either of the above addresses.

Member Number:
Member Name:
Email:
Phone:
BANK ACCOUNT DETAILS
ACCOUNT NAME:
NAME OF BANK / INSTITUTION:
BSB NUMBER OR BRANCH:
ACCOUNT NUMBER:
Date: