



# Business Netfa\$ Registration

Business Membership Number

Date: / /20

Membership Name:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Authority Details:

Please note a minimum of two Authorities will be required for posting any value transactions.

Authority Full Name

Authority Membership Number

Authority Full Name	Authority Membership Number

I/we wish to register for access to Business Banking on Netfa\$, the Internet Banking Service from Capricornia Credit Union Ltd.

I/we acknowledge that use of the Netfa\$ Internet Banking Service is subject to the Capricornia Credit Union's Terms and Conditions governing this service, and any amendments thereto.

Full Terms and Conditions must be read and agreed to prior to use of Business Banking on Netfa\$ at your initial log in.

Member Signature/s:

\_\_\_\_\_

This request must be signed in accordance with your account operation authority (eg "both must sign", 'either to operate' etc.)

Please fax form to (07) 49314 970 or email scanned document to [info@capricorniacu.com.au](mailto:info@capricorniacu.com.au)

Or by post to:

Netfa\$ Registrations  
PO Box 1135  
Rockhampton QLD 4700

### Office Use Only

<input type="checkbox"/> Signature(s) verified	By Accepting Branch Staff	Op no
<input type="checkbox"/> Netfast Activated	By Operations	Op no
<input type="checkbox"/> Account access confirmed	By Operations	Op no
<input type="checkbox"/> Authorities added	By Operations	Op no
<input type="checkbox"/> Password Issued	By Operations	Op no



# Netfa\$t Cancellation Request

Membership Number

Date:    /    /20

Membership Name:

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I/we wish to cancel access to NetFa\$t, the Internet Banking Service from Capricornia Credit Union Ltd.

I/we acknowledge to continue to be responsible for transactions initiated via Netfa\$t (in accordance with the Terms and Conditions) until this cancellation request is received by the credit union in the ordinary course of business.

Member Signature/s:

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This request must be signed in accordance with your account operation authority (eg “both must sign”, ‘either to operate’ etc.)

Please fax form to (07) 49314 970 or email scanned document to [info@capricorniacu.com.au](mailto:info@capricorniacu.com.au)  
Or by post to:

Netfa\$t Registrations  
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Office Use Only

Signature(s) verified

By Accepting Branch Staff

Op no

Netfast De-activated

By Operations

Op no