



Client Acknowledgement and Signature(s)

Complete the form using blue or black pen and print in clear CAPITAL LETTERS

This form is to be used for your recent personal account application. Please mail the completed form within 30 days of submitting your application.

For any assistance, please call our Direct Banking Centre on 1300 308 008

Mail the completed form to: **GPO Box 5302, SYDNEY NSW 2001**

Application reference number (located on the confirmation page and in the confirmation sent to you via email)

CUSTOMER DETAILS

Name of Applicant 1

Name of Applicant 2 (if applicable)

Account name 1

Account name 2 (if applicable)

Account name 3 (if applicable)

Account name 4 (if applicable)

ACKNOWLEDGEMENT

By signing this form, I acknowledge that:

- My signature will be used for account opening and in some cases to see if I'm the person giving HSBC instructions.
- If more than one person signs this form, then any one of us can give instructions and operate the accounts listed in this form.

AUTHORISATION

Signature

Date

Signature

Date

Name of Individual/Joint Signatory 1

Name of Individual/Joint Signatory 2