



ANZ Travel Card Purchase Form

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Step 1: Choose your ANZ Travel Card currency (Tick one only)

- United States Dollar (USD) Euro (EUR) Great British Pound (GBP) New Zealand Dollar (NZD)
 Hong Kong Dollar (HKD) Canadian Dollar (CAD) Indian Rupee (INR)

Step 2: Load value onto your ANZ Travel Card

Please refer to Clause 4(c) of the ANZ Travel Card - Product Disclosure Statement to ensure you load the **minimum initial purchase of value**.

Currency	<input type="text"/>	a) AUD Amount	AUD	<input type="text"/>
ANZ Sells Travel Card Rate	<input type="text"/>	b) Card Issuance Fee	AUD	\$11.00
Foreign Amount	<input type="text"/>	Total Payment Amount (add a + b)	AUD	<input type="text"/>

Step 3: Choose your Security Code

Security Code (4 digits) Use your **Security Code** to log into www.anzfx.com (My Account) or the automated phone service to access your Travel Card information. It is **NOT** your Card PIN for ATM/POS use.

Step 4: Provide your contact details (use BLOCK LETTERS only)

Title (circle one)	MR / MRS / MS / MISS / DR	First Name	<input type="text"/>				
Contact No.	0 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Surname	<input type="text"/>				
Address	STREET ADDRESS ONLY (P.O. BOXES NOT ACCEPTED)					Suburb	<input type="text"/>
State	<input type="text"/> <input type="text"/> <input type="text"/>	Post Code	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Country	<input type="text"/>	DOB	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Email*	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Country	<input type="text"/>	DOB	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Departure Date	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

*ANZ is collecting your email address so that we can contact you if there are any operational issues with your ANZ Travel Card.

I also consent to ANZ using my email address to send me information to promote ANZ's products and services and those of its related companies and alliance partners.

By signing below I acknowledge that I have received a copy of the ANZ Travel Card - Product Disclosure Statement (PDS) and am bound by the terms in the PDS, including those in relation to the collection and disclosure of my personal information.

Customer Signature (please sign)	<input type="text"/>	Date	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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ANZ recommends you read the **ANZ Travel Card - Product Disclosure Statement** which has been provided to you separately and is available by visiting www.anz.com, before deciding to acquire or hold the product.

Step 5: How did you hear about ANZ Travel Card? (Please tick where applicable)

- Newspaper Internet search Internet ad In-branch Branch staff
 Friends/Family Mail Email Other _____

Step 6: How will you pay for your ANZ Travel Card? (Tick one & enter details)

<input type="checkbox"/> Cash	Name	<input type="text"/>					
<input type="checkbox"/> ANZ Account (Excludes ANZ Term Deposits, ANZ V2 PLUS & Passbooks)	BSB:	0 1 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Account No:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
<input type="checkbox"/> Credit Card	Name	<input type="text"/>					
Credit Card Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>						
<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	Expiry Date	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>				

Authority to Debit ANZ Account or Credit Card Please debit my account/credit card for the Australian Dollar amount shown in Step 2

Payment via Credit card: Your provider may process this transaction as a Cash Advance. Please check with your provider prior to purchase

Note: Do not sign until ANZ has advised you of both the Australian Dollar amount that will be debited and its Foreign equivalent.

<input type="text"/>	<input type="text"/>
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Customer Signature 1 (ANZ account/Credit Card holder)

Signature 2 (for ANZ Joint accounts only, if applicable)

ANZ Use Only

Fax completed form to 1800 307 350 immediately to enable Card activation within 5 business hours

For existing ANZ a/c holder:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	BSB of branch where Customer Identification Process previously completed	<input type="checkbox"/> Customer photo ID sighted
For non-ANZ a/c holder:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	BSB of branch where Customer Identification Process completed	
Verification:	<input type="checkbox"/> Signing Authority (to debit ANZ account)	<input type="checkbox"/> Signature/s	
Primary Card No:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Back Up Card No.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
ANZ Staff (Print full name)	<input type="text"/>		
	BSB	0 1 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

Affix the peel-off sticker from the Card Carrier here.
e.g. 4283 0000 0000 0000 / 4283 0000 0000 0001