# eGive Application



Personal Contributions ONLY. Please use BLOCK LETTERS in black or blue pen only.

This form authorises UC Invest to debit your nominated account with another financial institution for a recurring gift, offering or tithe which will be credited to your nominated congregation.

completed form to our office:	In person: Level 2, 212 Pirie Street Adelaide	By mail: GPO Box 2145 Adelaide SA 5001	By email: info@ucinvest.com.au			
Need help or have a question?	Call: 1300 274 151	<b>Email:</b> info@ucinvest.d	com.au Visit: ucinvest.com.au			
STEP 1A: Your Details - Contributor	A	STEP 1B: Your Details - Co	ontributor B			
Notifications & Reminders  If you have a mobile phone we will send you an SMS reminder the day before your next scheduled debit is due to be paid to ensure you are not surprised by the payment.  I wish to opt-out of receiving SMS reminders		Middle Name Surname	Middle Name Surname			
Title First Name		Residential Address (if different to Contributor A)				
Middle Name		Address Suburb				
Surname		State	Postcode			
Date of Birth DD / M M  Residential Address  Address		Postal Address (if di Address	fferent to Contributor A)			
Suburb		Suburb				
State Posto	ode	State	Postcode			
Postal Address (if different to your re	sidential address)	Contact Details Telephone Mobile				
Suburb		Fax				
State Postcode		Email				
Contact Details Telephone Mobile		STEP 2: Which Congrega	ation are you Supporting?			
Fax		Congregation				
Email			adment to an evicting request			
			ndment to an existing request			
		This is an anon	ymous gift			

No details about your contribution will be shared with your

nominated congregation

## **STEP 3: Amount & Frequency** Amount \$ Minimum \$10 per debit Please start on Please provide at least 3 business days notice Continue debiting every: Week Month **Fortnight** Quarter Or Only once STEP 4: Option A - Bank Account Details You can contribute to your nominated congregation through a Direct Debit from your external bank account. All Direct Debits are governed by our Direct Debit Request Service Agreement contained in our Product Disclosure Statement. **Financial Institution BSB Number** Must be 6 digits **Account Number** Maximum of 9 digits **Account Holder** Must be held in the name of at least one contributor Option B - Credit Card Details

You can elect to contribute to your nominated congregation by requesting a recurring payment on your credit card.

our Type
Visa
MasterCard
Name on Card
Must be in the same name as a contributor noted in Step 1
Card Number
Expiry Date DD / MM

### STEP 5:

### **Transaction Authorisation**

I/We request and authorise UC Invest (Debit User ID: 520962/332875) to debit my/our account listed in **Step 4** for the amount and frequency nominated in **Step 3** and I/we declare that:

- The details I/we have provided in this application are true and correct.
- I/We have received, read and accept the terms and conditions of the eGive service contained within the UC Invest Financial Services Guide (FSG) and Product Disclosure Statement (PDS). A current copy of our FSG and PDS is available on our website ucinvest.com.au or by calling 1300 274 151.
- I/We acknowledge that this application creates a standing agreement which will remain in force until UC Invest is officially notified of its suspension or cancellation, unless marked above as a once only transaction.

#### **Contributor A**

Sign here					
Name					
Date					
Contributor E	3 (Joint C	ontribu	tions ON	LY)	
Name					

Card Type