

Change of Personal Details

Use this form to change your residential, postal and/or phone contact details. Only complete the relevant sections i.e. leave address and phone fields blank if the details have not changed.

For assistance, please call **1300 302 474**.

Please print and send your completed form to: memberservices@gatewaybank.com.au

Important information: You will not be able to save partially completed forms.

Your Personal Details

* Denotes Mandatory Field

Member Details*	Title* <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr <input type="checkbox"/> Prof		
First Name*	<input type="text"/>	Date of Birth*	DD <input type="text"/> MM <input type="text"/> YYYY <input type="text"/>
Middle Name	<input type="text"/>	Member No.*	<input type="text"/>
Last Name*	<input type="text"/>	Email Address*	<input type="text"/>

New Residential Address*	<input type="checkbox"/> Same as residential			
Unit Number	Street Number	PO Box	RMB	Unit/Street No.
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Name*	<input type="text"/>			
Suburb/Town*	<input type="text"/>			
State/Territory*	Postcode*	State/Territory	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Country*	<input type="text"/>			

New Contact Numbers and Email	Please specify at least one phone number and include country and area code		
Home	<input type="text"/>	Work	<input type="text"/>
Mobile	<input type="text"/>	Email	<input type="text"/>

Member Authority			
Please update my personal details as per above. I understand that Membership and signatory information provided to Gateway Bank on this form will apply to all accounts which may be held by me with Gateway unless otherwise specified.			
Signature*	<input type="text"/>	Date*	<input type="text"/>
Print Name*	<input type="text"/>	Changes effective from	<input type="text"/>

Office Use Only	Staff signature	<input type="text"/>	
Staff name	Comp.date	CBS updated <input type="checkbox"/>	Sent for scanning <input type="checkbox"/>
<input type="text"/>	<input type="text"/>		