



CATHOLIC DEVELOPMENT FUND

NEW DEPOSITOR DETAILS – PERSONAL

Surname(s):	_____	_____
Given names:	_____	_____
Title	_____	_____
Residential	_____	_____
Address:	_____	_____
Postal Address:	_____	_____
(if different)	_____	_____
	_____	_____
Telephone (Bus)	_____	_____
(Private)	_____	_____
(Fax)	_____	_____
(E-mail)	_____	_____
Occupation:	_____	_____
Date of Birth:	_____	_____
Gender:	Male / Female	Male / Female
IRD no.	_____ <input type="checkbox"/>	_____ <input type="checkbox"/>

(Tax can be deducted from one person only – please indicate preference by ticking ☐)

Parish: _____

Password: _____

Nominated Bank A/C (please provide deposit slip) _____

Tax Rate: (please circle one) 10.5% 17.5% 30% 33% (if not indicated we will assume 17.5% rate)

Number of signatures required (For withdrawals & account closure): **one / two**
(If you do not indicate we will assume that one can sign alone)

CDF Online Services required Yes / No

PLEASE GO TO NEXT PAGE

I / we wish to open (*please tick*)

☐ Term Investment \$ _____ at _____ % p.a. for _____ months
Less interest may be paid if withdrawn prior to maturity.

☐ On Call Savings Account \$ _____

☐ Education Savings Account \$ _____

☐ Christmas Club Account \$ _____ (*Proceeds are available December-February*)

☐ Funeral Savings Account \$ _____

- *No withdrawals are permitted during the account holder's lifetime.*
- *The Funeral Savings Account is opened in one name only – no joint accounts allowed.*
- *Only the Work and Income New Zealand limit (currently \$10,000) is treated as exempt from asset testing for a residential rest home subsidy.*

I / We acknowledge that neither any trustee of the Catholic Development Fund, nor any of its employees or agents (nor any other person on its behalf) is providing any financial service or financial planning service (as such terms are defined in the Financial Advisers Act 2008); for the avoidance of doubt, they have not provided any recommendation, guidance or opinion in connection with any investment in the Catholic Development Fund.

Information Statement

I/We hereby confirm that we have received and read the Information Statement issued by the Catholic Development Fund in compliance with the requirements of the Securities Act (Charities and Religious purposes) Exemption Notice 2003.

Privacy Act

I/We acknowledge that personal information concerning me/us provided to the Catholic Development Fund whether contained in this application or otherwise obtained, may be held and used by the Catholic Development Fund:-

- *To enable any application made to the Catholic Development Fund to be processed and/or accepted*
- *To enable any account or loan to be serviced and maintained*
- *To enable the Catholic Development Fund to provide me/us with information concerning its products and services*

The personal information provided in this application is collected by and will be held by the Catholic Development Fund, Unit 2 / 9 Washington Way, Christchurch.

I/we have the right under the Privacy Act 1993 to obtain access to and to request correction of any personal information held by the Catholic Development Fund concerning me/us

Other Conditions

It is the account holder's responsibility

- *to notify the Catholic Development Fund of any change of address*
- *to advise the Catholic Development Fund immediately if the password becomes known to non-account holders*

Signature(s) _____

Date _____

Please include two certified copies as listed below:

ID Type: ☐ Passport ☐ Drivers Licence ☐ Other _____

OFFICE USE ONLY: (on file) Identification Confirmed: ☐

Address Confirmed: ☐ Type: _____

Employee Name: _____

Signature: _____ Date: _____