

**MEMBER REFERRAL PROGRAM – FOR TISA MEMBERS****1. Tell me more about this Member Referral Program.**

TISA's Member Referral Program is aimed at recruiting new members for TISA through our current members. We want to encourage & motivate our current TISA members to recommend family members, friends, colleagues, businesses, or organizations to join TISA so that they too can enjoy the benefits of being a TISA member. In return for their referrals, TISA members will be offered a reward incentive.

**2. How does this Member Referral Program work?**

When you refer someone to join TISA and they become a member, TISA will reward you with K10 for this successful referral.

**3. What does a successful referral look like?**

A successful referral is when the new member's application is approved and salary deduction has commenced.

**4. How much will I be rewarded for a successful referral?**

K10 per successful referral. The more successful referrals, the more money you make.

**5. Which account will this incentive be deposited into?**

The incentive of K10 will be deposited into your S10 account.

**6. Will I be notified when this incentive is deposited?**

You will not be notified directly but a narration will be on your statement to indicate that you have received the incentive. It will be shown on your S10 account statement.

**7. Can I withdraw or access this incentive once its deposited into my S10 account?**

Yes, you can withdraw this incentive through your YumiCard.

**8. Who is eligible to participate in this program?**

All current TISA members.

**9. I am not a member, but I want to refer people to become TISA members. Will I be eligible for the incentive?**

No. Only current TISA members are eligible.

**10. I am no longer a contributing member of TISA, but I still have an existing account with TISA. Will I be eligible?**

As long as your S10 account with TISA is active, you are eligible.

**11. If I have any more questions, who do I speak to?**

You can talk to our Contact Center team:

Call: 1668 | Email: [Contact.Center@tisa.com.pg](mailto:Contact.Center@tisa.com.pg) | Facebook: Send us a message |

Branch: Talk to any of our staff at your nearest TISA Branch.



## MEMBERSHIP APPLICATION FORM

<b>Referral by:</b>	Member Name:	<b>OFFICE USE ONLY:</b>		New Membership No
	Membership No:	DD / MM / YY	Sign:	Referral Ref Number

### ACCOUNT APPLICATION

**Account Type:**

Once you apply for a General Savings Account, you are eligible to have access to a YumiAccount and YumiCard. These options have been pre-checked for you below

General Savings (\$1)
  Yumi Account (\$10)
  Yumi Card

### PERSONAL DETAILS

Title:  Mr  Mrs  Miss Other: \_\_\_\_\_  
 Given Name(s): \_\_\_\_\_ Middle Name: \_\_\_\_\_ Surname: \_\_\_\_\_  
 Marital Status:  Married  Single  Divorced  De-Facto  Widow/Widower  
 Date of Birth: DD - MM - YYYY Gender:  M  F Number of Children: \_\_\_\_  
 Place of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_  
 Mobile Number: \_\_\_\_\_ Email: \_\_\_\_\_

### RESIDENTIAL ADDRESS

**Accommodation Type:**

Own Property
  Rental Property
  Village Accomodation
  Settlement Accomodation
  Shared Family Accomodation

**Residential Address: (Mandatory - must not be a Postal Box address)**

City/Town: \_\_\_\_\_ Suburb: \_\_\_\_\_ Section: \_\_\_\_ Allotment: \_\_\_\_  
 District: \_\_\_\_\_ Province: \_\_\_\_\_

**Employment Details**

Full time Employment
  Part Time Employment
  Student
  Self Employed

*If you are employed, please provide the following information*

Employer Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
 Employer Address: \_\_\_\_\_ Employee Number: \_\_\_\_\_  
 Work Phone#: 6 7 5 \_\_\_\_\_ Date Commenced Employment: DD - MM - YYYY Expected Average Salary: K \_\_\_\_\_  
 Work Email: \_\_\_\_\_ Length of Employment Service: \_\_\_\_\_ Tax Identification Number (TIN): \_\_\_\_\_

### ELECTRONIC SERVICES

SMS Banking
  Internet Banking

### BENEFICIARIES

In the event of my death, all funds held in credit by TISA should be paid to thus/these individual(s):

Beneficiary Name	Relationship	Beneficiary DOB	Percentage %
		/ /	%
		/ /	%
		/ /	%

Note: Total percentage must add up to 100%. (Fill same form if require more space)

**CUSTOMER(S) SIGNATURE(S) AND DECLARATION**

I agree:

- that documents presented for identification purposes may be verified by the Society with an appropriate authority;
- to be bound by the terms and conditions which apply from time to time to this account opened by me with the Society;
- if card access has been requested, to be bound by the Conditions of Use governing the use of the card;
- the Society may charge to this or any other account(s) I may conduct with the Society or recover from me any Society fees, government charges, taxes or duties imposed on transactions on/or which relate to my account(s); and
- to check my account statements and notify the Society of any errors or unusual transactions within 3 months of receiving each account statement.

I acknowledge that I have received a copy of the relevant Terms and Conditions that apply to this account.

I certify that all information written on this form by me to be true and correct.

Signature: \_\_\_\_\_

Date:  /

**BRANCH USE ONLY**

Politically Exposed Person (PEP):  Yes  No

	Name	Signature	Date
Data Input by EDP:	<input type="text"/>	<input type="text"/>	<input type="text" value="/"/> / <input type="text" value="/"/>
Verified by SMSC:	<input type="text"/>	<input type="text"/>	<input type="text" value="/"/> / <input type="text" value="/"/>
Branch Head:	<input type="text"/>	<input type="text"/>	<input type="text" value="/"/> / <input type="text" value="/"/>

**IDENTIFICATION CHECKLIST**

Member must provide below identification combinations in order to be eligible for account opening.

- Two (2) Category "A" ID's
- One (1) Category "A" and Category "B" ID's
- Combination of Category "B" ID's

**CATEGORY A**

*Tick type of document(s) provided*

- |   |   |
|---|---|
| <input type="checkbox"/> Passport                             | <input type="checkbox"/> Superannuation Identification Card |
| <input type="checkbox"/> Driver's License                     | <input type="checkbox"/> PNG Work Permit                    |
| <input type="checkbox"/> Government Identification Card (NID) | <input type="checkbox"/> Student Identification Card        |
| <input type="checkbox"/> Employment Identification Card       |   |

**CATEGORY B**

*Tick type of document(s) provided*

- |   |  |
|---|--|
| <input type="checkbox"/> Certificate of Baptism   | <input type="checkbox"/> Government Health / Clinic Card   |
| <input type="checkbox"/> Citizenship Certificate  | <input type="checkbox"/> Education Institutional Certificates  |
| <input type="checkbox"/> Birth Certificate  | <input type="checkbox"/> Firearm License   |
| <input type="checkbox"/> Employment Confirmation Letter   | <input type="checkbox"/> Current Employment Payslip  |
| <input type="checkbox"/> License or Permit issued by a commodity board or Association (e.g. Cocoa permit, Gold License etc) | <input type="checkbox"/> Records of a bank (including bank debit or credit card or statement for an account or term deposit certificate) |
| <input type="checkbox"/> License of Permit issued by Government of PNG  | <input type="checkbox"/> Mortgage or other security documents over the customer's property   |
| <input type="checkbox"/> Superannuation Statement   |  |

Once you have completed this form, you can either:

- email this form together with your 3 requirement IDs to [voluntary@tisa.com.pg](mailto:voluntary@tisa.com.pg)
- or drop them off at your nearest TISA Branch.

For more information: Call 1668 | Email: [Contact.Center@tisa.com.pg](mailto:Contact.Center@tisa.com.pg)