



## 5. NEW ACCOUNT DETAILS

Name of financial institution

Branch name

BSB number

Account number

Account holder's name(s)

  

## 6. SIGNATURE

Signature of **Investor**

Date (dd/mm/yy)

**You can submit this form by:**

 mail BT Financial Group  
GPO Box 2675  
Sydney NSW 2001

*Adviser stamp (please use black ink only)*

BT USE ONLY