

Permission to Act on my Behalf (PAB)



If you wish to authorise another person to enquire about or access your account on your behalf, you must give your consent for that person to communicate with Gumala Aboriginal Corporation (GAC). Completed forms and supporting documentation should be emailed to memberships@gumala.com.au More contact details are available at the bottom of this form.

This PAB form will need to be completed and **updated every 12 months** to ensure that our records are up to date. If at any point you would like to remove the PAB from your profile, please contact the GAC office on 1800 486 252 and ask to speak to anyone in the Memberships Team who will be able to assist you with cancelling your PAB.

To authorise your consent, please complete the following information:

Member's Details

Name		
Home address		
	<i>(include street, suburb/town, state and postcode)</i>	
Postal address		
	<i>(if different from above)</i>	
Phone number		Date of birth
Email address		
Signature		
	<i>(Please note that for security reasons we cannot accept digital signatures on this form)</i>	
Date		

Authorised Person's Details

Name		
Home address		
	<i>(include street, suburb/town, state and postcode)</i>	
Postal address		
	<i>(if different from above)</i>	
Phone number		Date of birth

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Email address	
Signature	(Please note that for security reasons we cannot accept digital signatures on this form)
Date	

Types of authorisation

Member to complete

Please advise us of the type of access you permit the authorised person to have on your account.

I give consent to the person nominated below to *(tick boxes)*:

	Access my Gumala account information such as program balances
	Submit applications on my behalf
	Update Member details, such as changing addresses and phone numbers

Both Member (M) and Authorised (A) person to complete and sign

The parties to this document understand and accept *(tick boxes)*:

M	A	
		This authorisation is only active for 12 months from the date of approval
		The authorised person has responsibilities and obligations to act in the best interests of the Member specified on this form. GAC does not accept liability for those not acting responsibly and will notify the Member if there are any concerns in relation to account activity.
		If the authorised person does not comply with GAC policies and procedures, this authorisation may be cancelled.
		To renew this authority after 12 months a new form must be completed and submitted.
Member's Signature		Authorised Person's Signature
<i>(Please note that for security reasons we cannot accept digital signatures on this form)</i>		<i>(Please note that for security reasons we cannot accept digital signatures on this form)</i>

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Please note that **only the individual Member can make changes to their own banking details**. Any bank account changes cannot be done by someone acting on a Member's behalf.

Privacy

Your personal information is protected by law (including the *Privacy Act 1988*) and is collected by Gumala Aboriginal Corporation for the administration of Member benefits and services. This information is required to be collected, retained and shared in order to process applications for membership to and for the provision of Member services by both Foundation entities (Gumala Aboriginal Corporation as Manager and Gumala Investments Pty Ltd as Trustee).

You can obtain more information about the way we manage the personal information and our privacy policy on our website.