IAC IA PARTICIPANT MEMBERSHIP APPLICATION FORM

To:

The Secretary
Issuers and Acquirers Community
Australian Payments Network Limited
Level 23, Tower 3, International Towers
300 Barangaroo Avenue
Sydney NSW 2000

Re: **IAC Participant Membership of Issuers and Acquirers Community**

From: Full Name of Applicant:

ABN:

Place of Incorporation:

Registered Office Address / Principal
Place of Business in Australia:

Name of Framework Participant
Representative:

Telephone Number: (   )

Email Contact:

1. The above-named Constitutional Corporation ("**Applicant**") hereby applies for membership of the Issuers and Acquirers Community ("**IAC**") as an IA Participant in the following capacity/capacities:

    Issuer in an Approved Card Payment System*   ☐

    Acquirer of a transaction in an Approved Card Payment System*   ☐

    * **A list of Approved Card Payment Systems is available on the AusPayNet website**

2. The Applicant:

    (a)   represents that it engages, or proposes to engage, in the Australian Card Payments industry in the capacity or capacities nominated above and that it is able to meet the qualifications for membership of the IAC specified in the IAC Regulations (including any Certification Requirements if applicable);

    (b)   acknowledges that the IAC Regulations and the IAC Code Set constitute a contract under seal between:

    (i)   the Company and each Framework Participant; and

    (ii)   each current and future Framework Participant;

    (c)   acknowledges that the IAC Regulations and the IAC Code Set have been established for the benefit of the Framework Participants and any future Framework Participants;

(d) acknowledges that the rights and obligations contained herein shall ensure not only to AusPayNet, but to every other Framework Participant who has agreed to observe and comply with the IAC Regulations and IAC Code Set;

(e) acknowledges and agrees that if this application is accepted then subject to and in consideration of that acceptance it is bound to:

(i) comply with the provisions of the Constitution, the IAC Regulations and the IAC Code Set which are expressed to apply to the Applicant in the capacity in which the Applicant proposes to participate in the IAC; and

(ii) fulfil and perform every obligation and duty imposed on them by or pursuant to the IAC Regulations and the IAC Code Set;

(f) undertakes to pay the fees and other amounts payable by the Applicant under the IAC Regulations and/or the Constitution; and

(g) undertakes not to adversely effect the efficiency, security or integrity of the conduct and settlement of exchanges of Settlement Items between IA Participants.

Terms not defined in this application have the same meaning as in the IAC Regulations.

Dated: [**]**

EXECUTED by **THE APPLICANT**

by or in the presence of:

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....)   ....
(Signature of Secretary/Director)   (Signature of Director)
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....)   ....
(Full name of signatory)   (Full name of signatory)

Notes:

Applications should be completed in accordance with the following instructions:

(a) by two directors or a director and a company secretary of the Applicant; OR

(b) by affixing the Applicant's common seal witnessed by two directors or a director and a company secretary of the Applicant; OR

(c) under power of attorney, in which case the attorney must state that no notice of revocation of the power of attorney under which the application is signed has been received and an original power of attorney or certified copy should be enclosed for noting.

AusPayNet may require additional supporting documentation to satisfy itself that the application has been duly executed by the Applicant. If this is the case, AusPayNet will contact the Applicant directly.

IAC OPERATOR MEMBERSHIP APPLICATION FORM

To:
The Secretary
Issuers and Acquirers Community
Australian Payments Network Limited
Level 23, Tower 3, International Towers
300 Barangaroo Avenue
Sydney NSW 2000

Re: **Operator Membership of Issuers and Acquirers Community**

From: Full Name of Applicant:

ABN:

Place of Incorporation:

Registered Office Address / Principal
Place of Business in Australia:

Name of Framework Participant
Representative:

Telephone Number: (   )

Email Contact:

1. The above-named Constitutional Corporation ("**Applicant**") hereby applies for membership of the Issuers and Acquirers Community ("**IAC**") as a Framework Participant in the capacity of an Operator Member.

2. The Applicant operates or administers the following Approved Card Payment System:

3. The Applicant:

(a) represents that it engages, or proposes to engage, in the Australian Card Payments industry in the capacity of an Operator Member and that it is able to meet the qualifications for Operator Membership of the IAC specified in the IAC Regulations;

(b) acknowledges that the IAC Regulations constitute a contract under seal between:

   (i) the Company and each Framework Participant; and

   (ii) each current and future Framework Participant;

(c) acknowledges and agrees that if this application is accepted then subject to and in consideration of that acceptance it is bound to:

   (i) comply with the provisions of the Constitution and the IAC Regulations which are expressed to apply to the Applicant as an Operator Member, including, but not limited to, those provisions relating to membership (Regulation 4.1 and 4.3), rights and obligations (Regulation 5.1 and 5.6) and confidentiality (Regulation 14.6);

   (ii) fulfil and perform every obligation and duty imposed on them as Operator Members by or pursuant to the IAC Regulations; and

(d) undertakes to pay the fees and other amounts (if any) payable by the Applicant under the IAC Regulations and/or the Constitution.

Terms not defined in this application have the same meaning as in the IAC Regulations.

Dated: [   ]

EXECUTED by **THE APPLICANT**

by or in the presence of:

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(Signature of Secretary/Director)   (Signature of Director)

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....

(Full name of signatory)   (Full name of

signatory) Notes:

Applications should be completed in accordance with the following instructions:

(a) by two directors or a director and a company secretary of the Applicant; OR

(b) by affixing the Applicant's common seal witnessed by two directors or a director and a company secretary of the Applicant; OR

(c) under power of attorney, in which case the attorney must state that no notice of revocation of the power of attorney under which the application is signed has been received and an original power of attorney or certified copy should be enclosed for noting.

AusPayNet may require additional supporting documentation to satisfy itself that the application has been duly executed by the Applicant. If this is the case, AusPayNet will contact the Applicant directly.

IAC AFFILIATE MEMBERSHIP APPLICATION FORM

To:
The Secretary
Issuers and Acquirers Community
Australian Payments Network Limited
Level 23, Tower 3, International Towers
300 Barangaroo Avenue
Sydney NSW 2000

Re: **Affiliate Membership of Issuers and Acquirers Community**

From: Full Name of Applicant: _____

ABN: _____

Place of Incorporation: _____

Registered Office Address / Principal
Place of Business in Australia: _____

Name of Framework Participant
Representative: _____

Telephone Number: ( ) _____

Email Contact: _____

1. The above-named Constitutional Corporation ("**Applicant**") hereby applies for membership of the Issuers and Acquirers Community ("**IAC**") as a Framework Participant in the capacity of an Affiliate.

2. Describe the business activity undertaken by the Applicant for membership as an Affiliate which demonstrates its significant participation in the Australian Card Payments industry (if more space is required please include this information by way of annexure to this application):

_____

_____

_____

_____

3. Please check the below box if the Applicant wishes to subscribe to the ATM System Code contained in Volume 6 of the IAC Code Set in the capacity of an ATM Affiliate:

ATM Affiliate   ☐

4. The Applicant:
    (a)   represents that it engages, or proposes to engage, in the Australian Card Payments industry in the capacity of an Affiliate and that it is able to meet the qualifications for Affiliate membership of the IAC specified in the IAC Regulations;

    (b)   acknowledges that the IAC Regulations and Volume 6 of the IAC Code Set (if applicable) constitute a contract under seal between:

(i) the Company and each Framework Participant; and

(ii) each current and future Framework Participant;

(c) acknowledges and agrees that if this application is accepted then subject to and in consideration of that acceptance it is bound to:

(i) comply with the provisions the IAC Regulations which are expressed to apply to the Applicant as an Affiliate, including, but not limited to, those provisions relating to membership (Regulation 4.1 and 4.3), rights and obligations (Regulation 5.1 and 5.7) and confidentiality (Regulation 14.6), or to which the Applicant subscribes in relation to the Volume 6 of the IAC Code Set;

(ii) fulfil and perform every obligation and duty imposed on them by or pursuant to the IAC Regulations and Volume 6 of the IAC Code Set (if applicable); and

(d) undertakes to pay the fees and other amounts (if any) payable by the Applicant under the IAC Regulations.

Terms not defined in this application have the same meaning as in the IAC Regulations.

Dated: [   ]

EXECUTED by **THE APPLICANT**

by or in the presence of:

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....)   ....
(Signature of Secretary/Director)   (Signature of Director)
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....)   ....
(Full name of signatory)   (Full name of signatory)

Notes:
Applications should be completed in accordance with the following instructions:

(a) by two directors or a director and a company secretary of the Applicant; OR

(b) by affixing the Applicant's common seal witnessed by two directors or a director and a company secretary of the Applicant; OR

(c) under power of attorney, in which case the attorney must state that no notice of revocation of the power of attorney under which the application is signed has been received and an original power of attorney or certified copy should be enclosed for noting.

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