

# BANK NOMINATION FORM

FOR REFUNDS/CREDIT CARD COMMISSIONS/OTHER PAYMENTS



Consolidated Travel Group

## AGENCY INFORMATION

TRADING NAME

CTG ACCOUNT NUMBER

AGENCY CONTACT NAME

AGENCY CONTACT NUMBER

AGENCY CONTACT E-MAIL

## BANK INFORMATION

PAYMENTS TO BE DEPOSITED INTO THIS ACCOUNT

BANK ACCOUNT NAME

NAME OF BANK

BRANCH NAME

B.S.B. NUMBER

ACCOUNT NUMBER

AUTHORISED NAME

(MUST BE A SIGNATORY OF THIS BANK ACCOUNT)

TITLE

DATE

/ /

SIGNATURE

*Please Note: This form will remain active for all payments until you notify us otherwise. If you change your bank details, you must notify [creditmanagement@consolidated.Travel](mailto:creditmanagement@consolidated.Travel) for the changes to be made in our systems.*



1300 134 538

[ctgsales@consolidated.travel](mailto:ctgsales@consolidated.travel)

[www.consolidated.travel](http://www.consolidated.travel)

PO Box 24290, Melbourne VIC 3001 | ABN 60 004 692 791