



**Consolidated Travel  
Group**

**BANK NOMINATION FORM  
for Refunds/Credit Card Commissions/Other Payments**

<b>Agency Name:</b>	
<b>Account Number:</b>	
<b>Agency Contact Name:</b>	
<b>Agency Contact Number:</b>	
<b>Agency Contact E-mail:</b>	
<i>Payments to be deposited into this account</i>	
ACCOUNT NAME:	
NAME OF BANK:	
BRANCH NAME:	
B.S.B. NUMBER:	
ACCOUNT NUMBER:	

<b>Authorised Name (please print):</b>			
<b>Title:</b>			
<b>Authorised Signature:</b>		<b>Date:</b>	

*Please fill, sign and email completed form to [mel.ap@consolidatedtravel.com.au](mailto:mel.ap@consolidatedtravel.com.au)*

**\*\*Please note\*\*:** This form will remain active for all payments until you notify us otherwise.  
If you change your bank details you must notify [mel.ap@consolidatedtravel.com.au](mailto:mel.ap@consolidatedtravel.com.au)  
for the changes to be made in our systems.

**1300 134 538**

**E:** [ctgsales@consolidated.travel](mailto:ctgsales@consolidated.travel) **W:** [www.consolidated.travel](http://www.consolidated.travel)

**Melbourne** - 03 9251 5000 | **Sydney** - 02 9394 1402 | **Brisbane** - 07 3334 2000 | **Adelaide** - 08 8203 8001 | **Perth** - 08 9442 6000  
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