

Individual Client Registration Form

Client Details

Title					
Surname					
First Name					
Other Name(S)					
Occupation					
Gender					
Date Of Birth		TFN		ABN	

Contact Details

Street			
Suburb/City			
State		Post Code	
Telephone (Home)		Mobile	
Email			

☐ Is the client's address the same as their home address? Yes / No

Street			
Suburb/City			
State		Post Code	

Banking Details

Account Name			
BSB		Account Number	

Spouse Details

Title			
Surname			
First Name			
Other Name(S)			
Date Of Birth			
Taxable Income (\$)			

I wish to appoint Smarter Advisory & Accounting to be my accountants and tax agents for the individuals and entities specified in the client registration form including IAS / BAS Lodgements & Tax Returns, and to provide information to my local office, SA&A - Epping

Client's Signature		Date	
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Agent's Signature		Date	
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