

Application for recognition as a CA Financial Planning and Advice Specialist

This form is to be completed by members wishing to apply to become a CA Financial Planning Specialist.

Additional information can be found at www.charteredaccountantsanz.com/learning-and-events/specialisations/financial-planning.

Applicants should read Chartered Accountants Australia and New Zealand's (CA ANZ) regulation CR6C prior to completing this application. The regulation can be accessed at www.charteredaccountantsanz.com/member-services/member-obligations/regulations-and-guidance/australian-regulations.

Please complete **all sections** of this application and return with payment details to the Chartered Accountants Australia and New Zealand's office (see **page 7** for contact details).

Section 1 – Personal details

Title Mr Mrs Miss Ms Other (please specify)

Given name/s (in full) Surname

Preferred name When did you become a member (year)?

Section 2 – Contact details

Residential contact details

Street address Suburb/City

State Postcode Country

Postal address Suburb/City

State Postcode Country

Email

Phone (home) Mobile

Business contact details

Company name

Position title

Street address Suburb/City

State Postcode Country

Postal address Suburb/City

State Postcode Country

Section 2 continued overleaf >

Email (business)

Phone (business)

Mobile

Section 3 – Education/Experience requirements

In line with **CR6.5**, an Individual Member applying for specialisation must meet the specific service pre-requisites required for the specialisation for which they are applying.

Regulation **CR6C** (Regulation relating to Financial Planning Specialisation) recognises those Individual Members who have undertaken specific relevant study and gained experience in financial advice, to such a level that they are recognised as having specialist skills in the field.

In satisfying the educational component of the Financial Planning Specialisation an applicant will be required to

undertake courses recognised by CA ANZ for the purposes of this specialisation and will be required to provide an academic transcript detailing the required courses undertaken and their successful completion.

In satisfying the experience component of the Financial Planning Specialisation an applicant is required to have a minimum of four (4) years practical experience within the previous ten (10) years, where at least 50% of employment is related to financial advice. Also, an applicant must provide evidence of being licensed or authorised to offer financial advice.

i. Education history

I have completed the education requirements to become licensed or authorised to offer financial advice.

Please outline the details of your educational history below including completed undergraduate degree. A **certified copy** of the qualification and related academic transcript must be attached to this application. (Please attach additional pages to this application if space provided is insufficient.)

Qualification 1

Name of award

Name of institution/
Training provider

Year completed

Qualification 2

Name of award

Name of institution/
Training provider

Year completed

Qualification 3

Name of award

Name of institution/
Training provider

Year completed

Qualification 4

Name of award

Name of institution/
Training provider

Year completed

Membership of other relevant organisations

Please list your membership of any other financial advice related association, and the level of membership:

Name of organisation	Member number	Level of membership	Years as a member

ii. Experience

In accordance with clause CR6.4(b)(ii), I am currently an Australian financial services licensee or an authorised representative of a licensee. I have **attached** evidence to certify this. (e.g. Australian Financial Services Licence (AFSL) or Authority to Act as representative, etc.)

Please outline the details of your practical experience below. (Please attach additional pages to this application if space provided is insufficient.)

Current company name

Company street address Suburb/City

State Postcode Country

AFSL name (if applicable) AFSL No. (if applicable)

Position title

Position activities

Employment type Full-time Part-time at hours per week

Duration of employment / / to / / = years months
(DD/MM/YYYY) (DD/MM/YYYY)

Previous company name

Company street address Suburb/City

State Postcode Country

AFSL name (if applicable) AFSL No. (if applicable)

Position title

Position activities

Employment type Full-time Part-time at hours per week

Duration of employment / / to / / = years months
(DD/MM/YYYY) (DD/MM/YYYY)

Previous company name

Company street address Suburb/City

State Postcode Country

AFSL name (if applicable) AFSL No. (if applicable)

Position title

Position activities

Employment type Full-time Part-time at hours per week

Duration of employment / / to / / = years months
(DD/MM/YYYY) (DD/MM/YYYY)

Additional relevant information:

Section 4 – Privacy collection statement and Declaration

Privacy Collection Statement and Declaration

This Privacy Collection Statement contains details about how Chartered Accountants Australia and New Zealand ABN 50 084 642 571 including its subsidiaries and the New Zealand Institute of Chartered Accountants, a regulated body established under the Institute of Chartered Accountants Act 1996 (NZ) (“CA ANZ”) may collect, hold, use and disclose the personal and sensitive information you have submitted in your application for recognition as a CA Financial Planning & Advice Specialist (“Application”) with CA ANZ.

You can find out more about how we may use, disclose, process and handle your personal information by viewing our privacy policy at [Privacy Policy](#).

By providing your personal and sensitive information (such as your membership to a professional association or any criminal history) to CA ANZ in your Application, you consent to CA ANZ collecting your personal and sensitive information.

CA ANZ collects your personal and sensitive information directly from you in your Application. CA ANZ may also collect your personal and sensitive information from third parties such as professional associations with which we have reciprocal arrangements, government and statutory bodies, disciplinary and appeals tribunals, referees, law enforcement agencies, government and public registers and other third parties referred to in your Application.

The type of personal and sensitive information that CA ANZ collects includes your name, contact details, work and employment history, educational history (including qualifications and academic transcripts), Financial Planning and Advice related experience, registrations and licences with authorities, professional memberships, your referee information, any final adverse determinations (including sanctions) in relation to your professional and/or ethical conduct, your status as a principal of a practice entity, any bankruptcy, criminal history, your membership status, your health information and any other sensitive information to the extent that it is reasonably necessary for one or more of the purposes set out below.

The primary purpose of collecting your personal information is for CA ANZ to assess and process your Application for full membership to CA ANZ. This purpose includes:

- management and administration of membership and specialisation programs
- publication of your details to identify you as a CA Financial Planning and Advice specialist
- marketing products and services to you
- otherwise communicating with and managing our relationship with you
- any regulatory and disciplinary purposes; and

- checking whether all outstanding invoices (including subscription and disciplinary invoices) have been paid by you prior to submission of your application;

CA ANZ may disclose your personal and sensitive information to CA ANZ’s professional conduct bodies and other third parties including:

- NZICA and/or its professional conduct bodies;
- regulators, law enforcement bodies, professional associations and government or statutory bodies regarding details of any final adverse determinations (including sanctions) in relation to your professional and/or ethical conduct made by CA ANZ’s and/or NZICA’s professional conduct bodies;
- to agents, contractors and service providers where CA ANZ outsources functions;
- to other third parties such as local and international professional bodies, ASIC and other regulators and government bodies;
- to your referees; and
- to other third parties referenced in your Application form.

Providing us with the requested information is not required by law. However, if you choose not to provide us with the requested information or provide incomplete information, we may not be able to assess and process your Application.

We are permitted to process your information for the purpose described in this Privacy Collection Statement by relying on one or more of the following lawful grounds: (a) you have explicitly agreed to us processing such information for a specific reason; (b) the processing is necessary to perform the agreement we have with you or to take steps to enter into an agreement with you; (c) the processing is necessary for us to comply with our legal obligations; or (d) the processing is necessary for our legitimate interests, which include: (i) to protect our business interests; (ii) to ensure that complaints are appropriately investigated; (iii) to evaluate, develop or improve our products and services; (iv) to keep you informed of relevant products and services unless you indicate that you do not wish us to do so. We generally rely on your specific consent to process special categories of personal data (i.e., ‘sensitive information’). However, in some cases (for example, relating to an alleged offence), we may need to use some of that information to comply with our legal obligations.

By submitting your Application to CA ANZ you agree to the terms and conditions set out in this Privacy Statement and our [Privacy Policy](#) and consent to CA ANZ processing your personal and sensitive information for the purposes described in this Privacy Collection Statement.

Section 4 continued overleaf >

Where you have consented to our processing of such information (including any special categories of personal information), you may withdraw such consent at any time, by contacting us using the contact details in our [Privacy Policy](#). Please note, however, that in certain circumstances it may be still lawful for us to continue processing this information even where consent has been withdrawn, if one of the other legal bases described above is applicable.

If you are a resident in Australia or New Zealand, by submitting this Application, you consent to us using and disclosing your personal information for promotional and marketing purposes. You can opt-out or change your communication preferences through your MyCA account or by contacting our Member Support Team on 1300 137 322 in Australia or 0800 469 422 in New Zealand.

Declaration

By signing below and submitting this application form to CA ANZ I declare that:

- 1. the information that I have provided in this application is true and correct;
- 2. I can produce to CA ANZ originals of all information and documentation that I have relied on in submission of my application upon CA ANZ' request.
- 3. I will provide such further evidence and information in relation to this application as may be reasonably requested by CA ANZ;
- 4. I am bound by the decision of CA ANZ in relation to my application subject to my rights of appeal;
- 5. if my application is accepted by CA ANZ, I will satisfy the ongoing training and development obligations specified in **CR6.18 & CR6D.6(a)**.
- 6. by 'opting in' to publication of my identity as a CA Financial Planning and Advice Specialist on the MyCA platform, I consent to my details (which I have provided to CA ANZ, and any changes to those details), being published by CA ANZ for the purposes of identifying me as a CA Financial Planning and Advice Specialist.
- 7. I satisfy the relevant practical experience requirements, where at least 50% of employment is related to Financial Planning in accordance with **CR6.4(d)**.
- 8. To the extent permitted by law, I agree that CA ANZ is not responsible or liable for any unauthorised disclosure, loss, use or misuse of my personal information that may occur during the email transmission of communications to me or any third party nominated by me in the application (such as referees).
- 9. I have read, understood and agree to be bound by the CA ANZ Privacy Collection Statement, Privacy Policy and the terms and conditions specified in this application.
- 10. I understand that CA ANZ is relying on the information that I have provided in my Application in making any decision regarding acceptance of my application and that CA ANZ may take appropriate disciplinary action if my Declaration is false or misleading.
- 11. I have read, understood and agree to this Declaration.

Consent to receive promotional materials - Residents outside Australia and New Zealand

CA ANZ would like to send you relevant marketing and promotional materials about our products, services, activities and events. If you would like to receive marketing and promotional materials from CA ANZ, please tick the below consent box. You can opt-out or change your communication preferences through your MyCA account or by contacting our Member Support Team on 1300 137 322 in Australia or 0800 469 422 in New Zealand or emailing our Privacy/Data Protection Officer at privacy@charteredaccountantsanz.com

Please sign and date

Signature

Date / /
(DD/MM/YYYY)

While your personal information is collected by CA ANZ in Australia and New Zealand, it is likely that your personal information will be disclosed to overseas recipients outside of Australia (for example, to international professional bodies) and in accordance with our [Privacy Policy](#).

Our [Privacy Policy](#) also contains the contact details of our Privacy Officer and information regarding your rights (including how to withdraw your consent, if applicable) and how you can seek to access and correct your personal information or raise a privacy concern with us and how it will be dealt with.

If you have any questions or concerns about this Privacy Collection Statement, our Privacy Policy or how we handle your personal information, please contact our [Privacy Officer](#).

CA ANZ is formed in Australia and our members are not liable for our debts and liabilities.

Section 5 – Fee and payment details

Fees payable:

Specialist subscription fee

\$

The specialist subscription fee is based on a financial year (July to June). A pro-rata fee applies if the application is approved in any month other than July (see table below).

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
AUD\$ (incl. GST)	339	310.75	282.5	254.25	226	197.75	169.5	141.25	113	84.75	56.5	28.25

Payment method:

You will receive an email notifying you of the approval of your application, pending payment of an invoice which has been posted on your My CA account.

The invoice is payable by:

- Chartered Accountants Amex
 Amex Visa MasterCard Diners Club

Section 6 – Checklist

I have completed: (please cross)

- All the applicable sections (1 – 4)

I have provided/attached the following: (please cross)

- AFS Licence and Authorised Representative Certificate**

A copy of your AFSL as evidence of currently being licensed to provide financial advice e.g.: 'AFSL' or 'Authority to Act as a Representative'

- FASEA Professional Development Standard**

Evidence of having met the FASEA Professional Development Standard through development programs and activities including the mandatory categories Technical, Client Care and Practice, Regulatory Compliance and Consumer Protection and Professionalism and Ethics

- Certified copies of qualifications and related academic transcripts

- Copy of 'Training and Development Form/CPD Log' (for at least last 12 months)

- Referee report** – Australian Financial Services Licensee (AFSL)/CA or Professional Colleague/Client if the applicant is a Licence Holder

- Referee report** – CA ANZ member

- Referee report** – External Professional Colleague or Client (may be a Chartered Accountant)

Section 7 – Submitting your application form

How to submit your application

Please return your completed application form with accompanying attachments to:

Email specialisation@charteredaccountantsanz.com

Any questions

For further enquiries or additional information please contact the Member Support Team on:

Email specialisation@charteredaccountantsanz.com

Phone **Australia**

1300 137 322 or +61 2 9290 5660 (outside of Australia)
7am–7pm (AEST), Monday–Friday (excl. Public Holidays)

New Zealand

0800 4 69422 or +64 4 474 7840 (outside of NZ)
9am–9pm (NZ time), Monday–Friday (excl. Public Holidays)

Website charteredaccountantsanz.com

Referee report form - 1

Australian Financial Services Licensee (AFSL)/CA or Professional Colleague/Client
if the applicant is a Licence Holder

This form will support the application for recognition as a **CA Financial Planning and Advice Specialist**.

Important information for referees

Chartered Accountants Australia and New Zealand (CA ANZ) has established a Financial Planning Specialisation to recognise and promote Chartered Accountants who have been certified with significant knowledge and experience in the financial advice field. The Specialisation will also be a mechanism through which CA ANZ demonstrates leadership in the financial planning advice industry.

Applicants need to demonstrate a minimum of four (4) years practical experience within the previous ten (10) years, where at least 50% of employment is related to financial advice.

In accordance with **CR6.5(a)**, three written references must be provided in support of the application for Financial Planning specialisation. Please note that:

- At least one of these references must be from a Chartered Accountant with three (3) years membership or more who has known the applicant for 12 months or more (**CR6.5(b)**).
- All of the references must attest to the applicant's skills and knowledge in financial advice (**CR6.5(c)**).
- At least one of the references must be from the licence holder with whom the applicant is licensed.
- Where the applicant is the licence holder, the applicant should instead provide a reference from a member of CA ANZ who can attest to the applicant's current involvement in financial advice **CR6.5(d)**.
- Where the applicant is the licensee and engages a third party compliance firm then a reference can be provided by this firm.
- References should not be a family member or employee of the applicant. (**CR6.5(f)**)
- One of the non-Licensee references should be from a person outside the organisation that the Applicant is employed in, who may also be a CA. (**CR6.5(e)**).
- The reference must be prepared by the referee themselves and should not be a 'form' letter that is simply signed by the referee. Note: an electronic signature is permitted for the Referee's Report. (**CR6.5(g)**).

Section 1 – Applicant's details

Title Mr Mrs Miss Ms Other (please specify)

Given name/s (in full) Surname

Company name

Section 2 – Referee's details

Personal details

Title Mr Mrs Miss Ms Other (please specify)

Given name/s (in full) Surname

CA Membership number (where applicable)

[Section 2 continued overleaf >](#)

Business contact details

Company name

Position title

Street address Suburb/City
 State Postcode Country

Postal address Suburb/City
 State Postcode Country

Email (business)

Phone (business) Mobile

Membership of other relevant organisations

Name of organisation	Member number	Level of membership	Years as a member

Qualifications

Institution	Course/Qualification	Year completed

Applicant

Relation to applicant
 (Note: Reference can not be from a family member or an employee who reports to the applicant)

Period of time the applicant has been involved in the area of financial advice years

Describe the range of work undertaken and services offered by the Applicant in the area of financial advice.

When was the applicant's last 'Compliance Report Review'?
 (DD/MM/YYYY)

Was the applicant's most recent 'Compliance Report' satisfactory?

Yes No

If **No**, please outline the reasons below: (if insufficient space, please attach an additional sheet)

Are there any restrictions/limitations on the applicant as the Authorised Representative of the AFS Licensee?

Yes No

If **Yes**, please outline the reasons below: (if insufficient space, please attach an additional sheet)

In light of your knowledge of this applicant, would you support the application for specialist membership?

Yes No

Please provide any other information you consider relevant to the application for specialist membership:

(if insufficient space, please attach an additional sheet)

Referee Privacy Collection Statement

Chartered Accountants Australia and New Zealand (CA ANZ) collects your personal information as a referee for the purpose of assessing the applicant's application to become a CA Financial Planning and Advice Specialist. Your personal information is collected from the applicant and from you and may be used and disclosed in accordance with CA ANZ's [Privacy Policy](#), including to service providers, regulators and professional bodies. If you do not provide your personal information, CA ANZ may be unable to progress the application. By submitting this Referee Report, you confirm you have read and understood this statement and the Privacy Policy.

I support and recommend the above-mentioned Applicant to be a Specialist of Chartered Accountants Australia and New Zealand. I attest to the Applicant's professional competence and that he/she is of good reputation and a fit and proper person. I confirm that I am not related to the Applicant and that all the information supplied above is true and correct.

Signature

Date
(DD/MM/YYYY)

For assistance in completing the form, please contact us on:

Email specialisation@charteredaccountantsanz.com

Phone Australia
1300 137 322 or +61 2 9290 5660 (outside of Australia)
7am-7pm (AEST), Monday-Friday (excl. Public Holidays)

New Zealand
0800 4 69422 or +64 4 474 7840 (outside of NZ)
9am-9pm (NZ time), Monday-Friday (excl. Public Holidays)

Referee report form - 2

Chartered Accountants Australia and New Zealand member

This form will support the application for recognition as a **CA Financial Planning and Advice Specialist**.

Important information for referees

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Applicant's need to demonstrate a minimum of four (4) years practical experience within the previous ten (10) years, where at least 50% of employment is related to financial advice.

In accordance with **CR6.5(a)**, three written references must be provided in support of the application for Financial Planning specialisation. Please note that:

- At least one of these references must be from a Chartered Accountant with three (3) years membership or more who has known the applicant for 12 months or more (**CR6.5(b)**).
- All of the references must attest to the applicant's skills and knowledge in financial advice (**CR6.5(c)**).
- At least one of the references must be from the licence holder with whom the applicant is licensed.
- Where the applicant is the licence holder, the applicant should instead provide a reference from a member of CA ANZ who can attest to the applicant's current involvement in financial advice **CR6.5(d)**.
- Where the applicant is the licensee and engages a third party compliance firm then a reference can be provided by this firm.
- References should not be a family member or employee of the applicant. (**CR6.5(f)**)
- One of the non-Licensee references should be from a person outside the organisation that the Applicant is employed in, who may also be a CA. (**CR6.5(e)**).
- The reference must be prepared by the referee themselves and should not be a 'form' letter that is simply signed by the referee. Note: an electronic signature is permitted for the Referee's Report. (**CR6.5(g)**).

Section 1 – Applicant's details

Title Mr Mrs Miss Ms Other (please specify)

Given name/s (in full) Surname

Company name

Section 2 – Referee's details

Personal details

Title Mr Mrs Miss Ms Other (please specify)

Given name/s (in full) Surname

CA Membership number (where applicable)

Section 2 continued overleaf >

Business contact details

Company name

Position title

Street address Suburb/City
 State Postcode Country

Postal address Suburb/City
 State Postcode Country

Email (business)

Phone (business) Mobile

Membership of other relevant organisations

Name of organisation	Member number	Level of membership	Years as a member

Qualifications

Institution	Course/Qualification	Year completed

Applicant

Relation to applicant
 (Note: Reference can not be from a family member or an employee who reports to the applicant)

Period of time the applicant has been involved in the area of financial advice years

Please comment on the Applicant’s skills, knowledge and experience in financial advice, and the type of financial advice they are involved in. Please also add some comments regarding their character and reputation: (if insufficient space, please attach an additional sheet)

Referee Privacy Collection Statement

Chartered Accountants Australia and New Zealand (CA ANZ) collects your personal information as a referee for the purpose of assessing the applicant's application to become a CA Financial Planning and Advice Specialist. Your personal information is collected from the applicant and from you and may be used and disclosed in accordance with CA ANZ's [Privacy Policy](#), including to service providers, regulators and professional bodies. If you do not provide your personal information, CA ANZ may be unable to progress the application. By submitting this Referee Report, you confirm you have read and understood this statement and the Privacy Policy.

I support and recommend the above-mentioned Applicant to be a Specialist of Chartered Accountants Australia and New Zealand. I attest to the Applicant's professional competence and that he/she is of good reputation and a fit and proper person. I confirm that I am not related to the Applicant and that all the information supplied above is true and correct.

Signature

Date
(DD/MM/YYYY)

For assistance in completing the form, please contact us on:

Email specialisation@charteredaccountantsanz.com

Phone Australia
1300 137 322 or +61 2 9290 5660 (outside of Australia)
7am-7pm (AEST), Monday-Friday (excl. Public Holidays)

New Zealand
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9am-9pm (NZ time), Monday-Friday (excl. Public Holidays)

Referee report form - 3

External Professional Colleague or Client (may be a Chartered Accountant)

This form will support the application for recognition as a **CA Financial Planning and Advice Specialist**.

Important information for referees

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Applicant's need to demonstrate a minimum of four (4) years practical experience within the previous ten (10) years, where at least 50% of employment is related to financial advice.

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- At least one of these references must be from a Chartered Accountant with three (3) years membership or more who has known the applicant for 12 months or more (**CR6.5(b)**).
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- Where the applicant is the licence holder, the applicant should instead provide a reference from a member of CA ANZ who can attest to the applicant's current involvement in financial advice **CR6.5(d)**.
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Section 1 – Applicant's details

Title Mr Mrs Miss Ms Other (please specify)

Given name/s (in full) Surname

Company name

Section 2 – Referee's details

Personal details

Title Mr Mrs Miss Ms Other (please specify)

Given name/s (in full) Surname

CA Membership number (where applicable)

Section 2 continued overleaf >

Business contact details

Company name

Position title

Street address Suburb/City

State Postcode Country

Postal address Suburb/City

State Postcode Country

Email (business)

Phone (business) Mobile

Membership of other relevant organisations

Name of organisation	Member number	Level of membership	Years as a member

Qualifications

Institution	Course/Qualification	Year completed

Applicant

Relation to applicant

(Note: Reference can not be from a family member or an employee who reports to the applicant)

Period of time the applicant has been involved in the area of financial advice years

Please comment on the Applicant’s skills, knowledge and experience in financial advice, and the type of financial advice they are involved in. Please also add some comments regarding their character and reputation: (if insufficient space, please attach an additional sheet)

Referee Privacy Collection Statement

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I support and recommend the above-mentioned Applicant to be a Specialist of Chartered Accountants Australia and New Zealand. I attest to the Applicant's professional competence and that he/she is of good reputation and a fit and proper person. I confirm that I am not related to the Applicant and that all the information supplied above is true and correct.

Signature

Date
(DD/MM/YYYY)

For assistance in completing the form, please contact us on:

Email specialisation@charteredaccountantsanz.com

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