

Office Use Only
Member No.

Membership Application Form

for self-employed, spouse and other members

Complete this form if you **do not** have an employer making superannuation contributions for you.

Please complete in pen. Applications must be completed in full before an account can be established in your name.

1: Your personal details

Title	Date of birth	Sex (m/f)
<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
Given names	<input type="text"/>	
Family name	<input type="text"/>	
Residential address	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Postal address (tick box if same as above)	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone (home)	Telephone (work)	Mobile
<input type="text"/> - <input type="text"/>	<input type="text"/> - <input type="text"/>	<input type="text"/>
Email	<input type="text"/>	

2: Tax File Number

I have read the section on Tax File Numbers (TFNs) in the First Super Product Disclosure Statement and understand that I have a choice of providing my TFN. I understand that, when provided, First Super will only use my TFN for lawful purposes. If I choose not to provide my TFN, I understand that I will not be able to make after-tax voluntary contributions to First Super and my before-tax contributions may be taxed at the highest marginal tax rate, plus the Medicare levy. I hereby choose to provide my Tax File Number:

3: Your initial contribution

To join First Super, please write the amount of your initial contribution(s) in the appropriate box(es) below and provide a total figure. You need to make an initial contribution of at least \$1,000.

Transfer amount*	\$ <input type="text"/>	* If you are making an initial contribution by transferring or rolling over from another superannuation fund, please complete the <i>Transfer Your Super Form</i> , available on request or at www.firstsuper.com.au and attach the relevant documentation.
Member contributions	\$ <input type="text"/>	
Spouse contributions#	\$ <input type="text"/>	
CGT rollover^	\$ <input type="text"/>	
TOTAL	\$ <input type="text"/>	# To enable spouse contributions to be made on your behalf, please ensure that your spouse completes Section 4 of this form. ^ A small business CGT concession amount can be rolled over into First Super using the Capital Gains Tax Cap Election Form, available on request.

Cheques should be payable to First Super and marked 'NOT NEGOTIABLE'.

4: Spouse contributions

This section must be completed (and signed) by the eligible spouse of the applicant named in Section 1 who wishes to make a spouse contribution on the applicant's behalf.

I, (insert full name of contributing spouse) wish to make a contribution to First Super to establish a spouse account in First Super on the applicant's behalf.

I declare that:

- > I am the eligible spouse of the applicant named in Section 1 of this form;
- > I am currently living with the applicant on a permanent basis and I undertake to immediately notify the Trustee if this situation changes;
- > I receive some assessable income; and
- > I am not the applicant's employer.

Contributing spouse signature

Date

Now complete sections 5, 6 and 8 overleaf >>

5: Member investment choice

Before completing this section, First Super recommends you read the information about investing in this PDS. The information provided by First Super is of a general nature and does not constitute investment advice.

I would like to invest in the following investment options:

First Super Balanced (default)	<input type="text"/>	%
First Super Shares Plus	<input type="text"/>	%
First Super Growth	<input type="text"/>	%
First Super Conservative Balanced	<input type="text"/>	%
First Super Cash	<input type="text"/>	%
TOTAL must equal	<input type="text"/>	100%

Note: If you do not make a choice, your account will automatically be invested in First Super Balanced.

6: Nominating your preferred beneficiaries

Please provide details of any dependants who may be entitled to any insurance or superannuation benefits in the event of your death. This information will be used as a guide to determine who should be paid any benefits on your death. It is not binding on the Trustee.

Full name	Address	Relationship	% Share
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
TOTAL must equal			<input type="text"/>

100%

7: Other options

Voluntary contributions: Making additional contributions is a good way of boosting your retirement savings. Contact First Super for details.

Transfer your other super into First Super: To transfer superannuation from your other funds into First Super, please complete the *Transfer Your Super Form*, available on request or at www.firstsuper.com.au.

8: Declaration

To apply for membership of First Super, you must sign and date this form having read the statements below.

I hereby:

- > apply to the Trustee for admission as a member of First Super under the terms and conditions of the Trust Deed by which the Fund is operated;
- > acknowledge receiving the Product Disclosure Statement (PDS) and understand the duty of disclosure on this application;
- > acknowledge that I have read the section on nomination of beneficiaries contained in the PDS; and
- > acknowledge that First Super may use my personal details to search for lost superannuation money on my behalf.

Please sign here

Date

X

Please return this completed form to: First Super, PO Box 666, Carlton South VIC 3053

t: 1300 360 988 **f:** 1300 362 899 **e:** mail@firstsuper.com.au **w:** www.firstsuper.com.au

This application is part of the First Super Product Disclosure Statement dated 30 September 2011.