

C - Service and Membership details

Date of entry into Scheme: dd/mm/yyyy:

Date of first Contribution deduction:

Signature: Member Date dd/mm/yyyy

NOTES

1. *It is important that all information supplied is complete and accurate in order that a correct member record is established.*
2. *In terms of the rules, membership is compulsory on eligibility date for new members after the Scheme's commencement date.*
3. *Members must be in active service on the first day of membership.*
4. *Should your personal details change we recommend that you update your beneficiary nomination details.*

Left Thumb Print

Right Thumb Print

Other prints where there is no thumb or unclear finger print marks

Other prints where there is no thumb or unclear finger print marks

Date dd/mm/yyyy

DECLARATION BY ENROLLMENT OFFICER

I certify that this Contributor Enrollment Form was completed in my presence under my supervision and that information herein is certified contained to be accurate and true.

Name of Enrollment Officer

Signature

Official Stamp of Corporate
Trustee/Sponsoring Employer