

# NRMA Superannuation Plan Membership application

📌 This plan is for employees of NRMA

**Important:** Before completing this form please ensure you read and understand your Duty of Disclosure located at [sunsuper.com.au/dutyofdisclosure](http://sunsuper.com.au/dutyofdisclosure)

Please provide us with as much information as possible. Please tick boxes where appropriate. Use **BLOCK** letters and dark ink when completing this form and ensure it is signed and dated. \*Denotes mandatory field.

To access other information about your plan online, visit [sunsuper.com.au/nrma](http://sunsuper.com.au/nrma)

## Member number

if already a member

## Office use only

## 1 Personal details

Title	First name*	Middle name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Last name*	Date of birth (DD/MM/YYYY)*	Gender*
<input type="text"/>	<input type="text"/>	<input type="radio"/> M <input type="radio"/> F

Street address/PO Box\*

Suburb/Town*	State*	Postcode*	Home phone number	Daytime phone number*
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Personal email address	Mobile phone number*
<input type="text"/>	<input type="text"/>

**NOTE:** Where we can, we'll provide your documents, including statements and notices of changes to your account, electronically. We'll email or SMS you when information is ready to view in *Member Online*. If you would prefer information is posted to you, change your preferences in *Member Online*, the Sunsuper app or by contacting us.

**Tax File Number (TFN) details** – Sunsuper can use your TFN to help you bring your super together. Read the information about Providing your TFN on the last page.

My TFN	<input type="checkbox"/>	<b>Look for other super for me</b>
<input type="text"/>	<input type="checkbox"/>	By ticking this box, you consent to Sunsuper using the Australian Taxation Office (ATO) SuperMatch service to use your TFN to search for any other super you may have. This super may be with other super funds or held with the ATO. If we find money with the ATO, you also consent to Sunsuper requesting the ATO transfer these amounts into your Sunsuper account where possible. If we find money with other super funds, you'll have the choice of whether you transfer this or not. To help keep track of your super, we'll also conduct an ongoing annual search on your behalf. If at any time you wish to revoke your consent, please contact Sunsuper on 13 11 84.

## 2 Preferred beneficiaries

You can make a binding death benefit nomination by completing a *Binding death benefit nomination* form instead of the section below. A binding nomination is a legal instrument that 'binds' the Trustee of Sunsuper to pay your death benefit to your nominated beneficiaries in most cases. For more information or if you would like a *Binding death benefit nomination* form visit [sunsuper.com.au/beneficiary](http://sunsuper.com.au/beneficiary). You can also nominate a reversionary beneficiary when you open an *Income account*. Refer to the *Sunsuper for life guide* for details.

You can add or change your nomination at any time using *Member Online* or the *Sunsuper app*.

I nominate the people below as my preferred beneficiaries for the payment of my death benefit from my *Super-savings account*. I understand my preferred nomination will be used by Sunsuper as a guide only and that Sunsuper is not bound by my nomination when exercising its absolute discretion to pay my death benefit.

Given names	Surname	Date of birth	Gender	Relationship	Portion of benefit
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> M <input type="radio"/> F	<input type="text" value="(e.g. spouse)"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> M <input type="radio"/> F	<input type="text" value="(e.g. spouse)"/>	<input type="text"/>

If more beneficiaries are required please attach details separately.

Must add up to TOTAL 100.00%

➔ Please continue over page

### 3 Your insurance cover

**Important:** Before completing this section, please refer to your *Sunsuper for life Corporate Product Disclosure Statement (PDS)* and *Sunsuper for life Corporate Insurance guide (Corporate Insurance guide)*, available on your employer's microsite for insurance details. Details of the Standard cover available in your plan are contained in your *Corporate Insurance guide*. Eligibility includes attaining age 25 and reaching an account balance of \$6,000. Eligibility may also be impacted by the date you joined your employer. Limited Cover and an At Work requirement may apply to all or some of your cover. Further information on eligibility conditions and when cover starts can be found in your *Corporate Insurance guide*.

#### 3A Standard cover

Select 1 of the following 2 options

\*If you do not select an option, then option 1 applies.

1. I would like Standard cover to start once I attain age 25 and reach an account balance of \$6,000<sup>1</sup> **skip to section 4**
2. I would like to opt in to Standard cover regardless of my age and account balance<sup>1</sup> **continue to 3B**

Default option

<sup>1</sup> Other eligibility conditions apply. For full details of eligibility and information on when cover starts and stops, refer to your *Corporate Insurance guide*.

**Note:** If you don't want Standard cover with Sunsuper, please contact us.

#### 3B Standard cover details

##### Permanent employees

\*Refer to your *Corporate Insurance guide* for the definition of "Permanent Employment"

Choose your level of Standard Death and Total & Permanent Disability cover:

Level 1 (5%)     Level 2 (10%)     Level 3 (15%)     Level 4 (20%)

If you don't make a choice you'll be provided with Level 3 (15%) cover

**Note:** If you have chosen Level 4 (20%) cover you will need to provide satisfactory evidence of health to the insurer if your *Membership application* form is received more than 120 days after you commence employment with your employer.

##### Income Protection cover

Eligible permanent employees electing to obtain Standard cover now will be provided with Standard Income Protection cover of 85% of your Salary (which includes a 10% super contribution) with a Benefit Period of 2 years after an 84-day Waiting Period.

Refer to your *Corporate Insurance guide* for more information about Income Protection cover.

#### 3C Additional insurance cover

You can apply for Additional Death and Total & Permanent Disability cover at any time. Simply complete the *Change of insurance cover* form available on your employer's microsite.

##### Casual employees

##### Death cover

Eligible casual employees electing to obtain Standard cover now will be provided with \$50,000 of Standard Death only cover as described in your *Corporate Insurance guide*.

➔ Please continue over page

## 4 Your investment choice

Your *Super-savings account* balance will be invested in the Lifecycle Investment Strategy. For more information on our wide range of investment options visit [sunsuper.com.au/pds](https://sunsuper.com.au/pds) for a copy of the *Sunsuper for life Investment guide*. You can easily change your investments via *Member Online* or the *Sunsuper app*.

## 5 Your privacy - Personal information collection notice

The purpose for which Sunsuper is collecting the information on this *Membership application* is to provide superannuation benefits and related services for you. This includes processing your application, managing your participation in Sunsuper and ensuring you receive your entitlements. If the information requested is not provided, Sunsuper may be unable to properly administer your benefits and notify you about your entitlements. Sunsuper will normally only use the information you provide on this application for these purposes.

Sunsuper will also use this information to notify you about Sunsuper and other products. Sunsuper does not normally disclose information about members to parties outside the Sunsuper group, except parties contracted to provide services to Sunsuper. This includes but is not limited to the Fund's administration service provider, insurer, auditors and legal advisers.

If you subsequently make a claim for a disablement benefit, the insurer will disclose information about you to medical practitioners and other experts for the purposes of assessing your claim, and may collect information about your disability from these people or from your employer. Sunsuper also might be required by law to disclose information about you, for example to Government bodies such as the Australian Taxation Office, and we may disclose information to relevant overseas bodies in various countries, as described in our *Privacy Policy*.

Our *Privacy Policy* sets out how you can access information about your benefit and personal details, correct any information which is inaccurate or out-of-date and information on our privacy complaints process. We are committed to respecting the privacy of personal information you give us. If you would like a copy of Sunsuper's *Privacy Policy*, visit [sunsuper.com.au/privacy](https://sunsuper.com.au/privacy) or contact us.

## 6 Authorisation and declaration Sign this application form and return to Sunsuper:

### Providing your Tax file number (TFN)

Under the *Superannuation Industry (Supervision) Act 1993*, your superannuation fund is authorised to collect, use and disclose your tax file number.

The trustee of your superannuation fund may disclose your tax file number to another superannuation provider, when your benefits are being transferred, unless you request the trustee of your superannuation fund in writing that your tax file number not be disclosed to any other superannuation provider.

Declining to quote your tax file number to the trustee of your superannuation fund is not an offence. However giving your tax file number to your superannuation fund will have the following advantages:

- your superannuation fund will be able to accept all permitted types of contributions to your account/s,
- other than the tax that may ordinarily apply, you will not pay more tax than you need to - this affects both contributions to your superannuation and benefit payments when you start drawing down your superannuation benefits, and
- it will make it much easier to find different superannuation accounts in your name

so that you receive all your superannuation benefits when you retire.

### I declare that:

- I apply to become a member of Sunsuper and I agree to be bound by the Trust Deed that governs the Fund.
- I apply to open a *Super-savings account*.
- I acknowledge and have read my Duty of Disclosure at [sunsuper.com.au/dutyofdisclosure](https://sunsuper.com.au/dutyofdisclosure) and all of my details on this *Membership application* are correct.
- I have received, read and accept the accompanying *Sunsuper for life Corporate PDS*. I understand that other important information which forms part of the *PDS* is contained in the *Sunsuper for life Corporate Insurance guide*, *Sunsuper for life guide* and *Sunsuper for life Investment guide* and that the *PDS* should be read in its entirety.
- I understand all the conditions I must meet to be eligible to obtain Standard insurance cover, as described in the *Sunsuper for life Corporate Insurance guide*. I acknowledge insurance cover is provided by an external insurance company.
- By signing this *Membership application*, I consent to the collection and disclosure of information about me for the purposes shown above.

Member to sign here\*



Date (DD/MM/YYYY)\*

Once you've completed this form please sign and return it to your HR/Payroll department if requested to do so.

Otherwise please return to Sunsuper via [sunsuper.com.au/contact-us](https://sunsuper.com.au/contact-us) OR Reply Paid 2924 Brisbane Qld 4001

## 7 Employer use only (if required)

Payroll ID

Location

Employee's annual salary

Date joined employer

Date eligible to join Sunsuper

Employment status - where applicable

 Permanent full time Permanent part time Casual Fixed term

Category / Department

Average hours worked per week

 Under 15 hours Over 15 hours

Sign here on behalf of employer

Full name of signatory

Date signed