

Application for Membership Form for Employed Members

Please complete and return this form to: NESS Super, Locked Bag 20, Parramatta NSW 2124
Complete in pen using CAPITAL letters or type directly into this form and print it out.
Use (X) to mark boxes. This request must be signed and dated.

-  Website: www.nesssuper.com.au
-  Email: nessadmin@nesssuper.com.au
-  Freecall: 1800 022 067

This form is for Employees who are in receipt of an Employer contribution who wish to join NESS Super. If you are joining NESS Super as a Self-Employed Member, please do not complete this form. **Self-Employed Members** – please complete an **Application for Membership Form for Self-Employed Members**.

1. Member details (Please complete in full)

Mr/Mrs/Ms/Miss	Surname
<input type="text"/>	<input type="text"/>
Given names	
<input type="text"/>	
Date of birth (ddmmyyyy)	Male/Female
<input type="text"/>	<input type="text"/>
Telephone (daytime)	Mobile
<input type="text"/>	<input type="text"/>
Email	
<input type="text"/>	

Residential address

Street number	Street name	
<input type="text"/>	<input type="text"/>	
Suburb/Town	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>

Postal address (if different to residential address)

PO Box		
<input type="text"/>		
Suburb/Town	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>

2. Election to receive electronic communications

Would you like to receive information including any member statements, notices of material changes or occurrences of Significant Events and other member communication material electronically?

- Yes. By electing to receive eStatements, you will be able to access all your member statements online through MemberAccess.
 No


Email

By electing to receive member statements and other communications electronically, NESS Super will not use your email address to send you any direct marketing material unless you indicate your consent by ticking (✓) the box below.

- Yes. I would like NESS Super to send me information including any Marketing material that is available to me as a member.

3. Employment details

Your employer's trading name	
<input type="text"/>	
Date commenced with employer	Employer's telephone
<input type="text"/>	<input type="text"/>
On what basis are you employed? Choose (X) one option.	<input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Casual <input type="checkbox"/> Seasonal
Please complete the following two questions if you are an Apprentice	
Date Apprenticeship commenced	Date Apprenticeship due to be completed
<input type="text"/>	<input type="text"/>

 Please turnover

4. Tax File Number Notification (TFN)

Please read the TFN section on page 6 of the current NESS Super PDS

Tax File Number

5. Transfer of benefits

Combining all your super in one fund can reduce the fees you pay and make it easier to manage your super.

Please select (X)

Would you like NESS Super to help you transfer your benefit(s) from your other superannuation fund(s)?

Yes No

If you marked "YES", please complete the **Consolidate my Super into NESS Super Form** available at www.nesssuper.com.au.

6. Preferred beneficiaries

In case of death please nominate the person(s) to whom you wish your benefit to be paid. A nominated beneficiary can only be your spouse (legal or de facto), child (including adopted or step children), financial dependant, interdependant, or legal personal representative (your estate). If you nominate your legal personal representative, you should enter "legal personal representative" in the relationship field.

Name of beneficiary

Relationship (e.g. Wife, Son)

Date of birth (ddmmyyyy)

Portion of Benefit (%)

Name of beneficiary

Relationship (e.g. Wife, Son)

Date of birth (ddmmyyyy)

Portion of Benefit (%)

Name of beneficiary

Relationship (e.g. Wife, Son)

Date of birth (ddmmyyyy)

Portion of Benefit (%)

Must be whole numbers and add up to 100%

Important Note: Your preferred beneficiary nominations do not bind NESS Super in any way. This means, although your nomination will be taken into consideration, NESS Super has absolute discretion in determining how to distribute your death benefit and to whom. If you have or would like to make the nominations binding on NESS Super, you should refer to the rules applicable to *Binding Death Benefit Nominations*. If you would like to make your nominations binding on NESS Super, please complete a **Binding Death Benefit Nominations Form** available at www.nesssuper.com.au.


7. Investment choices

Please refer to the current NESS Super PDS and the **NESS Super - Additional Information** booklet available from www.nesssuper.com.au for more information about NESS Super's investment options before making a selection.

Your investment options can be mixed in unlimited combinations having regard to your personal investment objectives.

I acknowledge that if I do not make an investment choice or if my choices do not add up to 100%, my account will be invested in the default NESS MySuper option.

Cash	<input type="text"/> <input type="text"/> <input type="text"/> %
Stable	<input type="text"/> <input type="text"/> <input type="text"/> %
NESS MySuper	<input type="text"/> <input type="text"/> <input type="text"/> %
Property	<input type="text"/> <input type="text"/> <input type="text"/> %
High Growth	<input type="text"/> <input type="text"/> <input type="text"/> %
Australian Shares	<input type="text"/> <input type="text"/> <input type="text"/> %
Overseas Shares	<input type="text"/> <input type="text"/> <input type="text"/> %
Your total must add to 100%	1 0 0 %

 Please turn over

8. Insurance choices

If you join NESS Super and you satisfy the conditions for applying for default insurance cover, you will be covered for the following insurances when you either meet the Government requirements under *Putting Members Interest First (PMIF)*. To meet these requirements to receive insurance you must EITHER:

(A) Be at least 25 years of age AND have an account balance of \$6,000 or more with NESS Super; OR

(B) Complete the Application to Opt-In Early to receive insurance before you meet the requirements listed in (A) above:

- **Total & Permanent Disablement (TPD) cover** – automatic cover if you become totally and permanently disabled prior to 65 years. It is 2 units of cover depending on your age. Premiums are based on a members age. Refer to the **NESS Super – Employed Division Insurance Guide** for the table of premiums.
- **Death (including Terminal illness)** – automatic cover if you die prior to 70 years. Premiums and cover is based on member's age.

- **Income Protection** – Provides partial replacement income if you're temporarily unable to work in your own occupation due to illness of injury, prior to 65 years. Up to 75% of your income payable to you PLUS up to a 10% payable as a contribution to your NESS Super account. Premiums are based on 1.76% of employer (SG) contributions received by NESS Super (industry only).

When reviewing your insurance options, you can:

1. Keep it: Keep the automatic default insurance cover that you receive.
2. Change it: Apply to increase or fix your TPD & Death Cover. Retain or extend the default benefit period for Income Protection. Refer to the **Change My Income Protection Insurance Details Form - Employed Division** or the **Change My Death and Total & Permanent Disablement Insurance Details Form**;
3. Cancel it: You can opt out of insurance; however, you will not be able to claim for an event that occurs after your cover is cancelled. If you change your mind you can later opt back into insurance.

NESS Super Insurance options on joining – Income Protection change request

Opt-in to Income Protection

I wish to elect to **opt in**, to Income Protection with NESS Super as a new member. Default Insurance (30 Days Waiting Period & 104 Week Benefit Period. Premiums of 1.76% of SG contributions.)

I understand that by making this election I am making an election to opt-in for automatic insurance in accordance with 'Protecting your Super' and 'Putting Member's Interest First'. I understand that I may cancel this insurance at any time.

I wish to apply for a change in my Income Protection insurance cover as follows:

I **do not** wish to have Income Protection insurance and am choosing to opt out of this product

Retain Default Benefit Period 2 years (104 weeks)

Increase to 60 day waiting period. Premium will decrease to 1.584% of SG contributions.

Increase to 90 day waiting period. Premium will decrease to 1.338% of SG contributions.

Extend Benefit Period 5 years (260 weeks)

With a 30 day waiting period. Premium will increase to 2.816% of SG contributions.

Increase to 60 day waiting period. Premium will increase to 2.535% of SG contributions.

Increase to 90 day waiting period. Premium will increase to 2.141% of SG contributions.

NESS Super Insurance options on joining – Death and Permanent disablement change request

I request the changes to my NESS Super Death and Permanent insurance cover as follows.

Write down the total number of units of the fixed dollar amount of cover you need. If your application to change insurance on this Form is approved, it will replace the cover you currently have with us. Refer to the **NESS Super – Employed Division Insurance Guide** to see how much cover you can apply for.

I'd like the following units of cover: Death units TPD units

OR

I'd like the following fixed amount of cover (Please enter whole dollar amounts):


Death \$ 0 0 TPD \$ 0 0
(up to \$5,000,000) (up to \$3,000,000)

Note: If you are requesting an increase in cover, you will be required to complete a Personal Statement and submit it with this Form.

The Personal Statement is available on the NESS Super website.

Any TPD cover held as fixed cover will automatically reduce from the Insured Person's 61st birthday as set out in the table below:

Age last birthday	TPD Tapering factor (as a % of the insured cover for TPD)
Up to 60	100%
61	80%
62	75%
63	67%
64	50%

 Please turn over to complete and sign this form

8. Insurance choices Continued

Easy upgrade for specific life events

NESS Super also offers an easy upgrade of one unit of cover for specific Life events, such as buying a house, getting married or having a child without having to provide medical evidence (conditions apply). You can also apply for an additional 2 units of Death & TPD cover within a limited period of joining NESS Super without having to provide medical evidence (conditions apply). Refer to the **NESS Super – Employed Division Insurance Guide** for applying for more or new cover – Life events for more details.

9. Declaration

I hereby apply to become a member of NESS Super and agree to be bound by its Trust Deed and Rules. I have read the current **NESS Super PDS** and the **NESS Super - Additional Information** booklet and confirm that:

1. All statements and declarations given in writing by me in this application are true and correct.
2. I consent to NESS Super collecting and using my personal information to manage my superannuation and comply with relevant legislation.
3. I acknowledge that NESS Super may disclose my personal information to other parties including NESS Super's Insurer, professional advisors, government bodies, financial advisers and my employers.
4. I acknowledge that from time to time NESS Super will contact the Australian Taxation Office (ATO) or NESS Super's eligible rollover fund (ERF) in order to locate lost members' super. I authorise NESS Super to use my tax file number, name and date of birth to match my records with the information in the ATO's lost super members' registry or NESS Super's ERF and if a match is found, I authorise NESS Super to transfer the amount found to my NESS Super account. I understand that NESS Super will advise me of the details.
5. I am aware of the information on NESS Super insurances contained in the current **NESS Super PDS** and the **NESS Super - Employed Division Insurance Guide** including the terms and conditions of the insured benefits offered by NESS Super.
6. I have answered all questions correctly and acknowledge that my insurance benefit may be affected in the event of a claim, where my responses are later shown to be false or misleading. I acknowledge that the Insurer has the right to verify my answers in the application form.
7. I am aware of the general information on investments and my investment choices in relation to the NESS Super investment options contained in the current **NESS Super PDS** and the **NESS Super - Additional Information** booklet.
8. I am aware of NESS Super's recommendation to obtain financial advice when investing in a financial product such as NESS Super.
9. I acknowledge that if I do not make an investment choice or if my choices do not add up to 100%, my account will be invested in the default NESS MySuper investment option.

Privacy Statement

For further information the collection, use and disclosure of your personal information, refer to our Privacy Policy at www.nesssuper.com.au or call us on 1800 022 067.

Signature of applicant



Date (ddmmyyyy)

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