



SUPERANNUATION FUND ORDER FORM

FREECALL 1800 773 477

NAME:

FIRM:

PHONE:

E-MAIL:

FUND DETAILS

Name of Fund _____

Street Address
for 1st meeting _____

TRUSTEES AND MEMBERS

Corporate Trustee Details (if applicable)

Company Name _____ ACN _____

Address _____

ALL Directors are Members YES or NO ALL Members are Directors YES or NO

(if NO, provide) Full Name _____ DIRECTOR SECRETARY

#1 Full Name _____ Date of Birth _____

To be Primary Contact Address _____

Email Address _____ (for service of notices)

Employer (include ACN if company) _____
Employer Address _____

Role/s Held INDIVIDUAL TRUSTEE MEMBER

#2 Full Name _____ Date of Birth _____

Address _____

Employer (include ACN if company) _____
Employer Address _____

Role/s Held INDIVIDUAL TRUSTEE MEMBER

##3 Full Name _____ Date of Birth _____

Address _____

Employer (include ACN if company) _____
Employer Address _____

Role/s Held INDIVIDUAL TRUSTEE MEMBER

#4 Full Name _____ Date of Birth _____

Address _____

Employer (include ACN if company) _____
Employer Address _____

Role/s Held INDIVIDUAL TRUSTEE MEMBER

PAYMENT DETAILS: Please debit the following card details by the amount of \$ _____

TYPE OF CARD: Visa Mastercard *Diners Club *Amex * 3% surcharge applies.

CARD NUMBER: _____ EXPIRY DATE: (/)

NAME ON CARD: _____ SIGNATURE: _____

Please return this Form on FREEFAX 1800 655 556 or call with any queries.

COMPLETING THE ORDER FORM

PLEASE provide all of the information listed on page 1 to enable us to fully complete all documentation as quickly as possible.

SELF MANAGED SUPERANNUATION FUNDS

Trustee / Member – Generally, under the Superannuation Industry (Supervision) Act 1993:

- (a) ALL fund members must be trustees (or directors of a corporate trustee) and ALL trustees (or directors of a corporate trustee) must be fund members;
- (b) Sole member funds without a corporate trustee must have at least 2 individual trustees one of whom is the sole member;
- (c) An SMSF must not have more than 4 members.

Legal Representative – If a member is a minor or otherwise incapacitated (infirm or mentally incapable), they must be represented by an individual trustee/director of a corporate trustee who is over 18 and having full legal capacity.