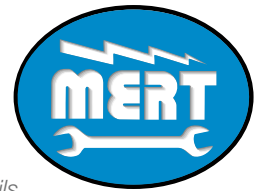


MERT Change of Membership Details



Please complete all sections in **black** ink using **BLOCK** letters and send to:
MERT Administration, Locked Bag 20, Parramatta NSW 2124 or email **mertadmin@as.com.au**

Read all the information on the back of this form to help you complete Section 1: Existing Membership Details (Compulsory) Section 2: Updated Membership Details correctly. This request will be invalid if not signed and dated.

SECTION 1: Existing Membership Details (compulsory)

Please fill in your Membership Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Mr/Mrs/Ms/Miss Surname

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Given Names Date of Birth (dd/mm/yyyy)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Street Address / PO Box

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Suburb / Town / City State Postcode

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Daytime Phone Number Email Address (upper and lower case where applicable)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SECTION 2: Updated Membership Details

Mr/Mrs/Ms/Miss Surname

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

NOTE: If your date of birth differs from your existing membership details, evidence must be provided. (eg. driver’s licence, birth certificate) Evidence of a name change must be attached. (eg. copy of marriage certificate, deed poll or decree nisi) Do not send originals unless requested.

Given Names Date of Birth (dd/mm/yyyy)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Street Address / PO Box

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Suburb / Town / City State Postcode

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Daytime Phone Number Email Address (upper and lower case where applicable)

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SECTION 3: Preferred Beneficiary(ies)

Surname	Given Names	Relationship (eg. wife, son)	Portion of Benefit	
				%
				%
				%
				%

MUST BE WHOLE NUMBERS. TOTAL MUST ADD TO: 100 %

SECTION 4: Tax File Number

Tax File Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SECTION 5: Privacy

Please note that by sending MERT personal information about yourself, you are agreeing to the following:

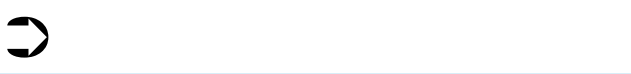
1. That you have read the MERT Privacy Statement and understand how MERT intends to protect your personal details, particularly in relation to the collection, storage, quality, use and disclosure (sharing) of personal information.
2. That MERT can use it for the purposes of running your redundancy account.

If you have any questions about your rights under the privacy legislation, please call MERT on 1800 023 692.

SECTION 6: Declaration

I declare that all of the above details are correct. If I have completed section 3, I nominate the above person(s) as my preferred beneficiary(ies) for the payment of my benefit in MERT when I die. If I have nominated a person(s) other than a spouse or a child as a preferred beneficiary(ies), I declare that s/he is either partially or wholly financially dependent on me. I understand that:

- my nomination will be used by the Trustee as a guide only: and
- the Trustee is not in any way bound by my nomination when exercising its absolute discretion to pay my benefit in MERT when I die.

Members Signature  Date (dd/mm/yyyy)

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How to Complete this Form

Compulsory Details

Please complete your membership number, full name and date of birth details. Completing your full name and date of birth details will enable us to locate your account, should you be unable to supply us with your membership number. Avoid the use of initials.

Change of Name

Complete sections 1, 2, and 5.

Please enter your change of name details (Evidence of a name change must be attached eg. copy of marriage certificate, deed poll, decree nisi).

Change of Preferred Beneficiary(ies)

Complete sections 1, 3 and 5.

Further information about Nominating your Preferred Beneficiary(ies)

To make sure that your nomination of preferred beneficiary(ies) is valid, please read the following information.

Who can I Nominate?

Under the MERT Trust Deed, benefits payable in the event of your death may only be paid out to your dependants, or to your legal personal representative. It is important that you take account of who may qualify as a dependant in your nomination.

The definition of 'dependant' under the MERT Trust Deed includes:

- your spouse (including de facto);
- your children of any age (including step, adopted or ex-nuptial); or
- any other person who is or was wholly or partially financially dependent on you.

Who decides?

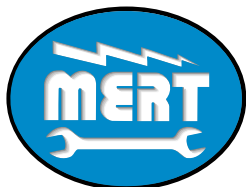
Under the Trust Deed, the Trustee alone is responsible for deciding to whom, and in what proportion, your death benefit should be paid. In making this decision however, the Trustee will take into account your nomination of preferred beneficiary(ies).

For your nomination to be effective, it is important that you keep it up to date, particularly if your family or marital circumstances change.

If you have no eligible dependants to whom the benefit can be paid, the Trustee may pay the benefit to your legal personal representative for inclusion in your estate.

Declaration

You must sign and date Section 5 before returning the form.



MERT

Locked Bag 20, Parramatta NSW 2124
Freecall: 1800 023 692 Fax: 1300 793 529