



Welcome to Telstra Super.

Thank you for considering joining Australia's largest corporate super fund.

The top seven reasons why you should make Telstra Super your number one choice.

- ✓ Competitive fees over your lifetime, no matter where you work.
 - ✓ A history of strong investment returns.*
 - ✓ Access to financial planning advice at no additional cost.
 - ✓ 12% discount on private health cover through HCF.
 - ✓ Comprehensive and flexible insurance options including death, Total & Permanent Disablement (TPD) and income protection cover.
 - ✓ Extensive range of educational tools and free education seminars Australia-wide.
 - ✓ Quality member publications and industry-leading resources including the Telstra Super Simulator and Super Bites videos.
-

Making the most of your future is only a few steps away.

STEP 1 Complete and return this application form.

STEP 2 You will then receive your Welcome Kit.

- Advise your investment choice for future contributions, whether you want to consolidate other super accounts, nominate a beneficiary or change your insurance details – our concise form booklet will tell you all you need to know.

STEP 3 Return the Welcome Kit form booklet in the prepaid envelope provided.

STEP 4 Visit our website.

- Register to use *SuperOnline™* our secure, online account management facility.
 - Subscribe to our convenient online communications including our monthly e-news, member magazine, quarterly statements and Annual Report.
-

* Past performance is not a reliable indicator of future performance.
Telstra Super Pty Ltd complies with the Privacy Act 1988 (Commonwealth).
For further information on privacy please contact the Privacy Officer
on 1300 033 166 or visit our website at www.telstrasuper.com.au to
download a copy of our Privacy Policy or Access and Correction Policy.

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Personal Plus Application

Welcome

Complete this form to open a *Telstra Super Personal Plus* account if you are:

- a former employee of the Telstra Group and are not a current Telstra Super member
- an eligible family member of a Telstra Super member
- a current Telstra Super member opening another account.

If you are signing this form on behalf of another (for example, as a Power of Attorney), please ensure you provide a certified copy of your authority to deal on the applicant's behalf. Please call Telstra Super for more details.

Before making any decisions about acquiring this product, you should read the *Telstra Super Personal Plus* Product Disclosure Statement (PDS) dated 1 July 2011.

If you have any questions about completing this form, please contact Telstra Super on **1300 033 166** from Monday to Friday between **8.00am** and **5.30pm** (Melbourne time).

A

Your Personal Details

Title Mr Mrs Miss Ms Other

Surname

Given name(s)

Residential address (PO Box not acceptable)

Suburb

State

Postcode

Mobile

Business no.

Home no.

Email address

Contact Preference

email

print

Date of birth

B

Your relationship to Telstra Super

I am an **eligible family member** of a current Telstra Super member.

Your relationship to current member

Their name is

Their member no. (if known)

Their date of birth (if known)

I am a **former employee** of the Telstra Group. My Telstra Super member number was (if known)

I am a **current** Telstra Super member. My Telstra Super member number is

How did you hear about us?

C

Make your investment choice

Telstra Super recommends you read your product disclosure statement before making your choice. For assistance with selecting your investment option, call us on **1300 033 166**.

A buy/sell spread will apply to your investment choice. Refer to the 'Additional information about your super' guide which forms part of the product disclosure statement. This is available at our website or by calling **1300 033 166**.

Please write the percentage of super you wish to invest beside each relevant option. The total must equal 100%.

If you invest across more than one investment option your initial percentage will change over time due to differing investment performance, unless updated.

If you choose not to complete this section your benefit will be placed in the age-based default option as detailed in your product disclosure statement.

| Option | Percentage split % |
|--------------------------------|------------------------|
| Growth | <input type="text"/> % |
| Balanced | <input type="text"/> % |
| Defensive Growth | <input type="text"/> % |
| Conservative | <input type="text"/> % |
| International Shares | <input type="text"/> % |
| Australian Shares | <input type="text"/> % |
| Property | <input type="text"/> % |
| Fixed Interest | <input type="text"/> % |
| Cash | <input type="text"/> % |
| Total (must equal 100%) | = 100% |

D

Contributions

Complete this section if you wish to make an initial contribution.

My initial contribution of \$ (post-tax)* is attached.

Please make your cheque payable to Telstra Super Pty Ltd and attach to this application. Once you receive your member number you can also make contributions by BPAY® at www.telstrasuper.com.au/bpay.

I declare that I am:

under 65 years of age, or

between 65–74, and have been gainfully employed for at least 40 hours in a period of not more than 30 consecutive days in the current financial year.

* Limits apply to post-tax contributions. For details see www.telstrasuper.com.au

Declarations

You **MUST COMPLETE** the following **Insurance declaration or Insurance opt-out, Tax File Number declaration, and the Member declaration to open your account.**

You can choose to apply for either base level death only cover or base level death and TPD cover subject to providing satisfactory answers to the questions below. If you do not require any insurance please complete the Insurance opt-out section. Insurance cover will not commence before the date your application is accepted by the fund. Death or death and TPD insurance cover will only continue subject to your account balance being above the amount required to pay your insurance premiums. If you require more information on insurance please refer to the Insurance Guide which forms part of your *Telstra Super Personal Plus* Product Disclosure Statement.

E

Insurance Declaration (Please **ONLY** complete E or F or G)

Base death cover only (Please answer **all** questions)

I do require base death cover at a cost of \$1 per week.

Are you suffering from symptoms of ill health or disability to the extent that:

- you satisfy one of the applicable total and permanent disablement definitions* Yes No
- you are **terminally ill*** Yes No

OR**F**

Base death and TPD cover (Please answer **all** questions)

I do require base death and TPD cover at a cost of \$1.92 per week.

- are you suffering from symptoms of ill health or disability to the extent that you satisfy one of the applicable total and permanent disablement definitions*? Yes No
- are you suffering from symptoms of ill health or disability to the extent that you are **terminally ill***? Yes No
- are you aware that you suffer from, or have received treatment or advice for any medical condition that could cause your death or total inability to work at some time in the next two years? Yes No
- have you ever made or are you entitled to make a claim for a benefit for TPD, terminal illness, workers compensation, disability income insurance or other statutory accident compensation plan? Yes No

- have you received advice or treatment for cancer, skin lesion, a tumour or any other malignant growth, any circulatory disorder (e.g. high blood pressure) or any back or neck complaint? Yes No
- are you, at the date of this application, incapable of performing all the duties of your regular occupation (including unpaid **domestic duties***) for at least 15 hours per week? Yes No
- have you had a test for HIV/AIDS that had a positive result or have/are engaged in any activity reasonably accepted as having an increased risk of exposure to the virus? Yes No

* Refer to the Insurance Guide (available from our website or by calling **1300 033 166**) which forms part of the *Telstra Super Personal Plus* Product Disclosure Statement for the Day 1 TPD definition, Domestic Duties TPD definition, Activities of Daily Working TPD definition, Unable to work TPD definition and definitions of terminally ill and domestic duties.

OR**G**

Insurance opt-out

I do **not** require any death or death and TPD insurance cover.

Signature Only sign if you don't want insurance
X

Date

Duty of Disclosure

Before you enter into or become insured under a contract of life insurance with an insurer, you have a duty under the Insurance Contracts Act 1984, to disclose to the insurer every matter that you know, or could reasonably be expected to know, that is relevant to the insurer's decision whether to accept the risk of the insurance and, if so, on what terms.

You have the same duty to disclose those matters to the insurer before you extend, vary or reinstate your insurance. Your duty, however, does not require disclosure of a matter:

- that diminishes the risk to be undertaken by the insurer
- that is of common knowledge
- that your insurer knows or, in the ordinary course of its business, ought to know, or
- as to which compliance with your duty is waived by the insurer.

Non-disclosure

If you fail to comply with your duty of disclosure and the insurer would not have covered you on any terms if the failure had not occurred, the insurer may avoid the cover within three years of issuing it. If your non-disclosure is fraudulent, the insurer may avoid your cover at any time. An insurer who is entitled to avoid your cover may, within three years of issuing it, elect not to avoid it but to reduce the sum that you have been insured for in accordance with a formula that takes into account the premium that would have been payable if you had disclosed all relevant matters to the insurer.

H

Tax File Number (TFN) declaration and authorisation

I acknowledge that I have read the information regarding TFN provision and collection (provided below) and understand that Telstra Super will not use my TFN for any unlawful purpose.

My TFN is

I

Member declaration

I declare that all the information I have provided on this form is correct to the best of my knowledge. I have read the *Telstra Super Personal Plus* Product Disclosure Statement dated 1 July 2011 and understand the information contained therein. I declare that I have read and understood the Duty of Disclosure information above and understand the consequences of non-disclosure. I agree to be bound by the terms of the Telstra Super Trust Deed from the date I become a member of the fund. I declare that I am aged 18 years or over.

Sign and date to validate form ▶

Signature

X

Date

Office use only
Member no.

Information about providing your TFN to Telstra Super

Under the Superannuation Industry (Supervision) Act 1993, Telstra Super is authorised to collect your TFN. If provided, your TFN will only be used for lawful purposes. These purposes may change in the future as a result of legislative change. Telstra Super may disclose your TFN to another superannuation provider when your benefits are being transferred but Telstra Super will not disclose your TFN to any other superannuation provider if you advise us in writing that you do not want your TFN disclosed to another superannuation provider. It is not an offence not to quote your TFN, however, providing your TFN will have advantages. See the *Telstra Super Personal Plus* PDS for details.