

CBA Group Super Plan Application For Division C Full Membership



⬇️ If you're a Division C basic member, you can use this form to apply for full membership of Division C at any time, providing you work 10 hours or more per week.

13 11 84 | australianretirementtrust.com.au
Reply Paid 2924 Brisbane Qld 4001

You should read the Super Savings – Corporate Product Disclosure Statement for Defined Benefit Account CBA Group Super Plan (Divisions C, D, E, CH and CK), prior to making a decision, to find out more about basic and full membership. You can find this at art.com.au/cbasp or contact us for a copy.

Once you become a full member, you can't revert to basic membership. If you change from part-time to full-time employment, you automatically become a full member, so you don't need to complete this form.

Important: Please provide us with as much information as possible and ensure your form is signed and dated.
*DENOTES MANDATORY FIELD.

Member number

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="button" value="M"/> <input type="button" value="F"/>		
Street Address / PO Box*				
<input type="text"/>				
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 **Australian Retirement Trust app**, or by contacting us.

Residential street address (if the same as above leave blank)*

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

2 Contribution Rate

I want to contribute to Division C at the following percentage of my super salary (you must choose one of the following)

<input type="checkbox"/> 2%	<input type="checkbox"/> 3%	<input type="checkbox"/> 4%	<input type="checkbox"/> 5%	<input type="checkbox"/> 6%	<input type="checkbox"/> 7%	<input type="checkbox"/> 8%	<input type="checkbox"/> 9%	<input type="checkbox"/> 10%
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➔ Please continue over page

3 Authorisation and declaration Please read the information below before signing

By signing this request form I am making the following statements to change my benefit category:

Member declaration

I declare and acknowledge that:

- All details in this form are true and correct.
- I understand how the contribution rate I have chosen affects my benefits.
- I understand if I am requesting an increase to my contribution rate, any grandfathered arrangements for my notional taxed contributions may no longer apply.
- I have read the Super Savings – Corporate Product Disclosure Statement for Defined Benefit Account CBA Group Super Plan (Divisions C, D, E, CH and CK) and I understand how the contribution rate I have chosen affects my benefits.
- I understand that by becoming a full Division C member I will no longer be able to revert my account to a basic membership.
- I authorise CBA Group to deduct contributions at the rate requested from my salary for superannuation purposes and to pay the contribution amount to my Super Savings – Corporate Defined Benefit account in Australian Retirement Trust.

Member to sign here*



Date (DD/MM/YYYY)*

We are committed to respecting the privacy of personal information you give us.
If you would like a copy of Australian Retirement Trust's Privacy Policy, visit australianretirementtrust.com.au/privacy or call 13 11 84.

Australian Retirement Trust Pty Ltd ABN 88 010 720 840 AFSL No. 228975 Trustee of Australian Retirement Trust ABN 60 905 115 063