

D AND J CROFTS SUPERANNUATION FUND

APPLICATION FOR MEMBERSHIP

To: The Trustee,

I hereby apply for admission to membership of the Fund.

I agree and undertake as follows:

- (a) I understand the terms and conditions of the Trust Deed and I acknowledge I have been informed of my rights and the rights of my Dependents pursuant to the Deed.
- (b) I will be bound by the provisions of the Deed governing the Fund.
- (c) I am not nor have been a member of any superannuation fund nor have an interest in any Approved Deposit Fund or Rollover Annuity other than as disclosed on the reverse of this Application.
- (d) I will make a full disclosure in writing of any benefits I have received, may receive or may be entitled to receive from any other superannuation fund, Approved Deposit Fund or Roll Over Annuity.
- (e) I will notify the Trustee if at any time I cease to be Gainfully Employed as defined in the Deed.
- (f) I consent to the Trustee acting as Trustee of the Fund.
- (g) In the event of my death, I nominate the following persons as my Nominated Dependents:-

(Note - a nomination is not necessary and if made must be reviewed from time to time.)

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NAME	ADDRESS	RELATIONSHIP	PERCENTAGE OF TOTAL BENEFIT OR FIXED AMOUNT
JODIE LOUISE CROFTS	14 IMPSON GARDENS SOUTH LAKE WA 6164	WIFE	100%

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Dated the 15<sup>th</sup> day of APRIL 1999.

Name: DARREN JOHN CROFTS

Address: 14 IMPSON GARDENS SOUTH LAKE

Signature: D.J. Crofts

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DARRIN JOHN CROFTS	14 IMPSON Gdns SOUTH LAKE WA 6164	HUSBAND	100%
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Dated the 15<sup>th</sup> day of APRIL 1999

Name: JOUIEN LOUISE CROFTS

Address: 14 IMPSON GARDENS SOUTH LAKE

Signature: 

ANNEXURE A

APPLICATION FOR MEMBERSHIP

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YOU CAN PUT NARELLE IN HERE OR LEAVE BLANK ?

NARELLE CROFTS. WIFE 100%

Dated the ..... day of ..... 19.....

Name: .....

Address: .....

Signature: <sup>BC.</sup> *X Doreen Crofts*

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LEAVE BLANK

Dated the ..... day of ..... 19.....

Name: .....

Address: .....

.....

Signature: <sup>NATHAN</sup>  
*X. N. J. Craft* .....