


Application For Membership

6. I, the person whose details appear in the Schedule, hereby apply for membership of the above mentioned Fund.
7. In consideration of my admission to membership, I hereby agree to abide by and be bound by the provisions of the Fund Deed and any rules made thereunder.
8. I hereby consent to:
 - (c) (where the Trustee of the Fund is a corporation) – be a director of the trustee corporation and I provide the information in the Schedule in compliance with my obligations under the *Corporations Act 2001* (Cth); and
 - (d) (where the Trustee is or are natural persons) – to be a trustee of the Fund.
9. I declare that I am not a disqualified person within the meaning of Section 120 of the *Superannuation Industry (Supervision) Act 1993*.
10. Where there is an Employer Sponsor applicable to me I hereby authorise that Employer Sponsor to deduct from my salary and pay to the Fund as contributions the amounts (if any) as are from time to time agreed upon by myself and my Employer as contributions to be made by me to the above mentioned Fund.

Schedule:

FULL NAME	Vittoria Francesca Hanlin
ADDRESS	Unit 1 60 Mount Street, West Perth WA 6005
DATE OF BIRTH	10/01/1971
PLACE OF BIRTH	Harvey, WA
TAX FILE NUMBER	173677491

Signature 

Date *08/03/2023*

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 - (a) (where the Trustee of the Fund is a corporation) – be a director of the trustee corporation and I provide the information in the Schedule in compliance with my obligations under the *Corporations Act 2001* (Cth); and
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Schedule:

FULL NAME	Jonathan Peter Hanlin
ADDRESS	Unit 1 60 Mount Street, West Perth WA 6005
DATE OF BIRTH	21/01/1966
PLACE OF BIRTH	Perth, WA
TAX FILE NUMBER	145584756

Signature 

Date 8/3/2023