

**APPLICATION FOR MEMBERSHIP OF
THE PC KROEHN SELF MANAGED SUPERANNUATION FUND**

1. I, the person whose details appear in the Schedule, hereby apply for membership of the above mentioned Fund.
2. 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.
3. I hereby consent to:
 - (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
 - (b) (where the Trustee is or are natural persons) – to be a trustee of the Fund.
4. I declare that I am not a disqualified person within the meaning of Section 120 of the *Superannuation Industry (Supervision) Act 1993*.
5. 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	PHILLIP KROEHN
FORMER GIVEN AND FAMILY NAMES (IF ANY)	
ADDRESS	Dunstan Road Waikerie SA 5330
DATE OF BIRTH	25 April 1972
PLACE OF BIRTH	
TAX FILE NUMBER	180 273 161

Signature  _____

Date 6th May 2015

APPLICATION FOR MEMBERSHIP OF

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SCHEDULE

FULL NAME	CINDY EMMA KROEHN
FORMER GIVEN AND FAMILY NAMES (IF ANY)	
ADDRESS	Dunstan Road Waikerie SA 5330
DATE OF BIRTH	18 September 1970
PLACE OF BIRTH	
TAX FILE NUMBER	151 182 018

Signature



Date

6th May 2015
