

APPLICATION FOR MEMBERSHIP

Name of Fund: J & R Superannuation Fund

Member's Name: John Iacono

(Minor's Name if on behalf of minor)

Address:
96 Bradshaw Street
Essendon VIC 3040

Date of Birth: 18/02/1952

Occupation:

Telephone:
03 9372 0380

Fax:

Tax File Number.

318 438 128

Contributing Employer(s):

I hereby apply to become a Member of the above-mentioned Fund.

• I apply as the parent *or* guardian of and on behalf of the minor referred to above. (Delete if inapplicable)

I understand that my membership is subject to terms and conditions specified in the Governing Rules.

This application is accompanied by a Product Disclosure Statement.

I have received from the Trustee a notice containing information needed for the purpose of understanding the main features of the Fund, its management and financial condition and investment performance. (The Trustee must attach these if the Member is joining at a time other than when the fund is established).

Signed:



Dated:

APPLICATION FOR MEMBERSHIP

Name of Fund: J & R Superannuation Fund

Member's Name: Rose Iacono

(Minor's Name if on behalf of minor)

Address:
96 Bradshaw Street
Essendon VIC 3040

Date of Birth: 12/05/1956

Occupation:

Telephone:
03 9372 0380

Fax:

Tax File Number.

315 001 170

Contributing Employer(s):

I hereby apply to become a Member of the above-mentioned Fund.

• I apply as the parent or guardian of and on behalf of the minor referred to above. (Delete if Inapplicable)

I understand that my membership is subject to terms and conditions specified in the Governing Rules.

This application is accompanied by a Product Disclosure Statement.

I have received from the Trustee a notice containing information needed for the purpose of understanding the main features of the Fund, its management and financial condition and investment performance. (The Trustee must attach these if the Member is joining at a time other than when the fund is established).

Signed:

Dated:

