THE B & VA GRAY SUPERANNUATION FUND

APPLICATION FOR MEMBERSHIP CONFIDENTIAL

1.	I hereby apply	for admission	to membership	of the Fund.
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2.	I state I am eligible to be admitted as a member of the Fund and (if the Fund is a self
	managed fund) appointed a Trustee (or a director of a corporate Trustee).

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3.	lad	aree	as	fol	lows:

- (1) I will be bound by the Trust Deed governing the Fund as it is or may be varied from time to time.
- (2) I understand the terms and conditions of the Trust Deed, including the benefits payable, my rights and the rights of my Dependants.
- (3) I consent to the Trustee acting as Trustee of the Fund.
- (4) I agree and consent (if the Fund is a self managed fund) to be appointed a Trustee or a director of the corporate Trustee and declare I am eligible to be so appointed pursuant to law.
- (5) I agree to give to the Trustee my details (including my Tax File Number), or obtain them from my Employer.
- (6) I agree to give any other information the Trustee may require for the purposes of the Fund.

Dated the	1874	day of	MA	2012	
Name: Address: Occupation: Date of Birth: TFN:	Truck Drive	Northern Highwa er		Signature: 18-5- 2012	
NOMINATED	DEPENDAN	IT(S)			
I nominate the		ersons as my No	minated Depend	dants (and acknowledge this is not	
•	,				
NAME	,	RE	LATIONSHIP	% OF TOTAL BENEFIT	
•	GRAH	RE Wi		% OF TOTAL BENEFIT	
NAME	,				
NAME	,				
NAME	,				

THE B & VA GRAY SUPERANNUATION FUND

APPLICATION FOR MEMBERSHIP CONFIDENTIAL

1.	I hereby apply for admission to membership of the Fund.			
2.		I state I am eligible to be admitted as a member of the Fund and (if the Fund is a self managed fund) appointed a Trustee (or a director of a corporate Trustee).		
3.	I agree as follows:			
	(1)	I will be bound by the Trust Deed governing the Fund as it is or may be varied from time to time.		
	(2)	I understand the terms and conditions of the Trust Deed, including the benefits payable, my rights and the rights of my Dependants.		
	(3)	I consent to the Trustee acting as Trustee of the Fund.		
	(4)	I agree and consent (if the Fund is a self managed fund) to be appointed a Trustee or a director of the corporate Trustee and declare I am eligible to be so appointed pursuant to law.		
	(5)	I agree to give to the Trustee my details (including my Tax File Number), or obtain them from my Employer.		
	(6)	I agree to give any other information the Trustee may require for the purposes of the Fund.		
Dated	the	18 ⁺¹⁴ day of may 2012		
Name: Addres Occup Date o TFN:	ss: ation:	Vickie Anne Gray 1419 Great Northern Highway, Upper Swan Signature: Truck Driver 08/03/1961 Date: 18-5-2012		

I nominate the following persons as my Nominated Dependants (and acknowledge this is not a binding nomination):

NAME

RELATIONSHIP

% OF TOTAL BENEFIT

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100

NOMINATED DEPENDANT(S)