

## APPLICATION FOR MEMBERSHIP

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Name of Fund: **Lisdoon Management Pty Ltd Employee Superannuation Fund**

Member's Name: **Dr Ronald Werner Bade**

(Minor's Name if on behalf of minor)

Address:  
91 ELIZABETH STREET  
EDENHOPE, VIC 3318

Date of Birth: 09/09/1927

Occupation:

Telephone:

Fax:

Tax File Number. 311 451 746

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: 01/06/1978

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## APPLICATION FOR MEMBERSHIP

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Name of Fund: **Lisdoon Management Pty Ltd Employee Superannuation Fund**

Member's Name: **Catherine Anne Wright**

(Minor's Name if on behalf of minor)

Address:  
91 ELIZABETH STREET  
EDENHOPE, VIC 3318

Date of Birth: 16/12/1958

Occupation:

Telephone:

Fax:

Tax File Number. 310 002 880

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: 01/06/1978



## APPLICATION FOR MEMBERSHIP

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Name of Fund: **Lisdoon Management Pty Ltd Employee Superannuation Fund**

Member's Name: **Ronald John Bade**

(Minor's Name if on behalf of minor)

Address:  
91 ELIZABETH STREET  
EDENHOPE, VIC 3318

Date of Birth: 19/11/1954

Occupation:

Telephone:

Fax:

Tax File Number. 312 089 327

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: 01/06/1978

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