

APPLICATION FOR MEMBERSHIP

OF

P.A. RYAN PENSION FUND

NAME: Philip Ashley Ryan

ADDRESS: 25 Brisbane Corso
FAIRFIELD QLD 4103

DATE OF BIRTH: 15 February, 1961

EMPLOYED BY: Self

DATE EMPLOYED:

- A. I hereby apply for admission as a Member of the Fund and, if admitted as a Member, agree to be bound by the provisions of the Deed establishing the Fund.
- B. I understand that a copy of the Deed will be made available to me for perusal on demand at a reasonable time.
- C. I hereby acknowledge receipt of written notice of the existence of the rights which I will have to receive benefits under the Fund if admitted as member.
- D. I agree to make the contributions, if any, required from me, and I authorise the Employer to deduct such contribution from my wages or salary as and when due to me.
- E. I declare that I am not* a member of any other superannuation arrangement and I hereby undertake to advise the Trustee should I subsequently join any other superannuation arrangement.

X 
WITNESS

XPR 
SIGNATURE

DATE : / /

- * If you are a member of any other superannuation arrangement delete the word "not " and attach a note stating details of other superannuation arrangements.

THIS PART TO BE COMPLETED BY THE TRUSTEE

Application Approved

XPR 
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Date Membership Commences
Membership Category
(If applicable)

23rd September, 1998
Executive
Clause 2.1(c)