

**APPLICATION FOR MEMBERSHIP**

**OF**

**P.A. RYAN PENSION FUND**

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**NAME:** Philip Ashley Ryan

**ADDRESS:** 25 Brisbane Corso  
**FAIRFIELD QLD 4103**

**DATE OF BIRTH:** 15 February, 1961

**EMPLOYED BY:** Self

**DATE EMPLOYED:**

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- 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

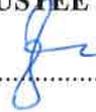
DATE : / /

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

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**THIS PART TO BE COMPLETED BY THE TRUSTEE**

**Application Approved**

XPR   
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**Date Membership Commences** 23rd September, 1998  
**Membership Category** Executive  
**(If applicable)** Clause 2.1(c)