

**APPLICATION FOR MEMBERSHIP
(NON-EMPLOYER SPONSORER MEMBER)**

OF

**THE DARCY KENNEDY SERVICE TRUST SUPERANNUATION BENEFITS
FUND**

- 1 I, Kaylene Maree Kennedy apply for membership of the Fund which is administered in terms of the Trust Deed governing the Fund.
- 2 I have been advised in writing of the benefits which I will be entitled to receive from the Fund on joining the Fund, in the event of my retirement, death or disablement, the method of determining those benefits and any conditions relating to those benefits.
- 3 In consideration of my admission to membership, I agree to abide by and be bound by the provisions of the Trust Deed governing the Fund.
- 4 I agree to Michael & Kaylene Kennedy and ~~Vicki O'Connor~~ acting as Trustee of the Fund.
- 5 My Date of Birth is 28/03/1954.

6 NOMINATION OF BENEFICIARIES

Whilst I acknowledge the discretion the Trustee has to determine who the benefit is paid to, I nominate the following persons to receive the benefit payable by the Trustee in the event of my death:

PERSON	RELATIONSHIP	PERCENTAGE
Michael Kennedy	Husband	100%

Date: 14-3-04

Applicant's Signature: *Kaylene Kennedy*

Witness: *Beth Grady*