

Death And Total & Permanent Disablement Insurance Opt Out Form

PLEASE COMPLETE FORM IN BLOCK LETTERS IN BLACK INK

1. Important information for you

You may cancel your Death and Total & Permanent Disablement cover by completing this form. From the date your form is received, your insurance cover will cease and premiums will no longer be deducted from your account.

2. Your RecruitmentSuper Membership Details

Your RecruitmentSuper Member Number (if known)

Male Female

Surname (Mandatory*)

Title

Date of Birth (Mandatory*)

Given Name (Mandatory*)

Previous Surname (if different)

Unit / Street Number

Street Name

Suburb / Town

State

Postcode

Email Address** (Please **do not** leave any spaces empty, continue word on next line if necessary)

Phone (After Hours)

Mobile**

Phone (Business Hours)

Fax

* If these fields are not completed, we may not be able to complete your request.

** Providing your mobile number/email address means you are willing to receive important information about your RecruitmentSuper account and other benefits and services by SMS or email.

3. Privacy Statement

The information requested on this form is required in order to administer your membership. It may also be provided to specific organisations to provide services to you on our behalf. Your personal information will not be used or disclosed for any other purpose without your consent. If you do not provide the information requested, RecruitmentSuper may not be able to administer your account. You may have access to the information RecruitmentSuper holds about you. If you would like a copy of our Privacy Statement, please visit our website or call 1300 304 000.

4. Consequences of Canceling your Insurance Cover

Before you decide whether or not to cancel your insurance cover you should be aware that:

- If you die or suffer total and permanent disablement you will no longer be entitled to an insured benefit. The benefit will be based on the account balance only. You should consider whether, without insurance, you and / or your family would have enough money if you become disabled or die.
- If, at a later stage, you wish to recommence insurance cover, you will have to be underwritten. This means that you will have to complete a Personal Statement. You may need to provide additional medical information and possibly undergo medical tests. The insurer may refuse cover or offer restricted cover.
- Your cover is provided on a group basis and may cost less than insurance available to you on an individual basis.
- You will not be entitled to a refund of the premiums that have already been paid to provide you with insurance cover in the past.

You should carefully consider the consequences of opting out of your cover. If necessary, you should consult your financial adviser.

5. How do I cancel my insurance cover?

If you still wish to cancel your insurance cover, please complete the below section.

Please cancel my insurance cover for death and total and permanent disablement.

I acknowledge that:

1. The consequences of canceling my insurance cover have been fully explained to me;
2. Any entitlement to an insurance benefit will cease effective from the date this form is received by RecruitmentSuper;
3. The trustee will cease deducting premiums from my account effective from the date this form is received by RecruitmentSuper; and
4. I have executed this form freely, without any influence and not on the basis of any advice given or representations made by the trustee of RecruitmentSuper or any associate of the trustee.

Signed

Date

Witnessed by:

Signed

Date

6. Please return this form to:

RecruitmentSuper
GPO Box 4839
Melbourne Vic 3001

For further information:

Phone: 1300 304 000
Fax: 1300 304 444
Email: info@recruitmentsuper.com.au
Website: www.recruitmentsuper.com.au

Professional Associations Superannuation Limited
(ABN 14 056 917 303 AFSL 222590 RSE L0000352)
as Trustee of Professional Associations Superannuation
Fund (PASF) (ABN 78 984 178 687 RSE R1000429).
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