



ARC Master Trust Change of Details Form

1. PERSONAL DETAILS

Member number
(if known)

Name

Title

Mr

Mrs

Miss

Ms

Other

Surname

Given name(s)

Date of birth

Gender

Female

Male

Other

Residential address

Street

Suburb

State

Postcode

Country

Mailing address (if different to residential address)

Street

Suburb

State

Postcode

Country

Contact details

Home phone
number

Work phone
number

Mobile phone
number

Email address

2. CHANGE OF NAME

To change your name, please attach a certified copy of your marriage certificate or deed poll certification and complete the sections below.

Previous name

New name

Previous signature

Previous signature

3. INSURANCE COVER CANCELLATION

Please indicate below what type of insurance cover you would like to cancel.

I wish to cancel my insurance benefits as follows:

Total and Permanent Disablement only benefit

Death or Death and Total and Permanent Disablement benefit

Income Protection benefit

4. NOMINATION OF BENEFICIARIES

To nominate beneficiaries, please complete this section. Please note the Trustee of the Fund is only able to pay your death benefit to one or more of your Dependant(s) and/or your Legal Personal Representative. In the event of your death, the Trustee will seek to determine all your Dependant(s) and, considering your nomination, will determine whom and in what proportions to pay your benefit.

I request that in the event of my death the Trustee consider paying any benefit to the Dependant(s) or Legal Personal Representative nominated below in the proportions indicated:

Title, first name and surname of dependant	Full address of dependant	Date of birth	Dependant relationship ¹	Benefit (%)
		DD / MM / YY		
		DD / MM / YY		
		DD / MM / YY		
		DD / MM / YY		
		DD / MM / YY		
¹ For more information regarding nominating a beneficiary, please refer to the section titled 'Nominating a beneficiary' in the ARC Master Trust Member Booklet on our website www.arcmt.com.au or call us for a copy.			Legal Personal Representative (your estate)	
			TOTAL (must add up to 100%)	100%

Please note this nomination will replace any existing nomination you have made in respect of your ARC account.

5. INVESTMENT ELECTION

Please complete this section if you would like to select the investment options in which you wish to have your superannuation invested.

It is important you read the 'Investments' section in the ARC Master Trust Member Booklet and the relevant Investment Option Profile, both available on our website www.arcmt.com.au in the 'Member Resources' section under the 'ARC Master Trust' tab before you make any investment decision.

Investment switch instructions.

Apply all future contributions and switch my existing account balance to the following investment option(s).

Apply only future contributions to the following investment option(s).

Switch only my existing account balance to the following investment option(s).

Investment Option	Future contributions (%)	Existing account balance (%)	Code (TAL use only)
ARC Cash			CF (S7)
ARC Defensive			EA (S1)
ARC Conservative			RA (S4)
ARC Moderate			ZC (S9)
ARC Growth			RE (S5)
ARC High Growth			RN (S6)
ARC Australian Shares			SF (S2)
Total (must add up to 100%)	100	100	

6. ADVISER CHANGES

Please complete this section if you wish to change your current TAL adviser and/or amend the current adviser remuneration structure.

New TAL adviser details

Adviser name	<input type="text"/>
Dealer group/ Licence holder name	<input type="text"/>
Adviser number	<input type="text"/>

Fee structure

Please refer to section 'Fees and costs' in the ARC Master Trust Member Booklet available on our website www.arcmt.com.au for full details on the fees and other costs applicable.

Contribution Fee remuneration

The contribution fee is charged on each contribution, rollover or transfer made to your account. This amount excludes GST and represents the amount you may negotiate with your financial adviser. You authorise us to make this payment to your financial adviser on your behalf as set out in the member declaration. The amount paid to your financial adviser will increase to allow for GST. However, this does not affect the amount paid by you.

Contribution Fee

<input type="checkbox"/> 4.0%	<input type="checkbox"/> 3.5%	<input type="checkbox"/> 3.0%	<input type="checkbox"/> 2.5%	<input type="checkbox"/> 2.0%	<input type="checkbox"/> 1.5%	<input type="checkbox"/> 1.0%	<input type="checkbox"/> 0.5%	<input type="checkbox"/> 0.0%
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Rollover/Transfer Fee

<input type="checkbox"/> 4.0%	<input type="checkbox"/> 3.5%	<input type="checkbox"/> 3.0%	<input type="checkbox"/> 2.5%	<input type="checkbox"/> 2.0%	<input type="checkbox"/> 1.5%	<input type="checkbox"/> 1.0%	<input type="checkbox"/> 0.5%	<input type="checkbox"/> 0.0%
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Administration Fee remuneration

The Administration Fee remuneration amounts nominated below will replace the existing remuneration rate. You authorise us to make this payment to your financial adviser on your behalf as set out in the member declaration.

Standard (0.55% pa of the Administration Fee)

Dial down rate (select the reduction to apply)

<input type="checkbox"/> 25%	<input type="checkbox"/> 50%	<input type="checkbox"/> 75%	<input type="checkbox"/> 100% (nil Administration Fee remuneration)
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Adviser Service Fee

The Adviser Service Fee nominated below will replace the existing Adviser Service Fee amount currently charged. This is an ongoing fee (payable monthly), calculated as a percentage of the assets in your account. This amount excludes GST and represents the amount you may negotiate with your financial adviser. You authorise us to make this payment to your financial adviser on your behalf as set out in the member declaration. The amount paid to your financial adviser will increase to allow for GST. However, this does not affect the amount paid by you.

<input type="checkbox"/> 0.0%	<input type="checkbox"/> 0.1%	<input type="checkbox"/> 0.2%	<input type="checkbox"/> 0.3%	<input type="checkbox"/> 0.4%	<input type="checkbox"/> 0.5%
<input type="checkbox"/> 0.6%	<input type="checkbox"/> 0.7%	<input type="checkbox"/> 0.8%	<input type="checkbox"/> 0.9%	<input type="checkbox"/> 1.0% (maximum)	

6. ADVISER CHANGES (CONTINUED)

Insurance premium

The insurance premium remuneration rate nominated below will replace the existing insurance premium remuneration rate currently charged.

Standard (20% of the insurance premium paid to the Fund's Insurer). This amount excludes GST and represents the amount you may negotiate with your financial adviser. The amount paid to your financial adviser will increase to allow for GST. However, does not affect the amount paid by you.

Reduced to

0% (excluding GST) of the insurance premium paid to the Fund's Insurer

10% (excluding GST) of the insurance premium paid to the Fund's Insurer

Remove adviser

I want to remove the below financial adviser(s) currently servicing my policy

Adviser 1 full name

Adviser 2 full name

7. AUTHORISED REPRESENTATIVE

Please complete this section only if you wish to nominate an Authorised Representative. The following persons, in addition to yourself (and your financial adviser), are authorised to access information in relation to your ARC account. Please note this nomination will replace any existing nomination you have made in respect of your ARC account.

Name

Signature

Director Sole Director and Secretary

Company signatories must indicate their correct capacity.

Name

Signature

Director Sole Director and Secretary

Company signatories must indicate their correct capacity.

8. DIRECT DEBIT

Please complete this section if you want to cancel or modify your direct debit arrangement with TAL. This form cannot be used to set up a new direct debit arrangement. Please complete an Additional Contribution and Direct Debit Request form to do so. The form is available on www.arcmt.com.au or by calling us.

Cancel my direct debit or Modify my direct debit amount to

Before next billing date* or From this date

Please complete this section if the contribution type is changing.

Personal Spouse

All Employer contributions can only be paid via Superstream.

* You should provide us with at least fourteen (14) days' notice to cancel or modify your direct debit arrangement. If you're unsure about your next billing date, please call us.

9. PRIVACY

'We' and 'us' and 'our' refer to the provider of the group risk insurance: TAL Life Limited ABN 70 050 109 450 80

'You' and 'Your' refer to the individual whose information we collect and hold for the purposes of providing products and services to you.

The way in which TAL collects, uses and discloses your information is described in the TAL Privacy Policy available at www.tal.com.au/Privacy-Policy or on request. If you have any questions regarding your privacy please contact our Privacy Officer. You may be entitled to gain access to information we have on file about you. If you wish to request access, please contact TAL in writing.

Personal and sensitive information is collected from you to enable TAL to provide its products or services to you. Further information may be requested from you at a later time, such as if you want to make alterations to your policy or at claim time. If you do not supply the required information to us we may not be able to provide our products and services to you or pay your claim. In processing and administering your insurance (including at the time of claim) your personal information may be disclosed to TAL and any relevant bodies corporate including the following third parties, where necessary: your employer, general practitioners or health professionals to verify any health information you may provide, your (or your employer's, if relevant) financial adviser, other companies within the TAL group of companies; organisations to whom we outsource our mailing, administration and information technologies, the Insurance Reference Service, investigators, the Trustee (if relevant), the administrator of the product or fund, reinsurers, Government departments if required or authorised to do so, or any person acting on your behalf such as a lawyer or accountant. Information regarding the privacy rights of individuals is available at www.oaic.gov.au which is the website of the Office of the Australian Privacy Commissioner.

By signing this Form you permit TAL to collect, use and disclose your personal and sensitive information in accordance with our Privacy Policy.

10. MEMBER DECLARATION

Please read the following acknowledgements and declarations carefully and sign at the bottom of this section.

If the Adviser remuneration details in Section 6 were completed, I authorise TAL to make these payments to my adviser for information, assistance and services my adviser has provided to me in relation to this product. I confirm that the amounts were inserted in that section prior to me signing this Form and agree that the Trustee has no responsibility in relation to the provision of such adviser services.

If I am applying to cancel my insurance cover:

- I understand my insurance cover will cease once ARC receives my written request, and
- I understand that if I decide to apply for insurance at a later stage, the Fund's insurer will require information about my state of health.

If I have updated my Investment Option(s), I:

- agree to receive all relevant information, including profiles for the investment options on the ARC Investment Menu via the ARC website www.arcmt.com.au, and
- confirm that I have obtained, read and understood the relevant profile(s) for my selected investment option(s) prior to making my investment decision. I acknowledge, where additional investments are made, that I may not have a current version of the profile for that investment option and that a current version is available on the ARC website www.arcmt.com.au or by calling TAL for a copy.

If I have made or updated my nomination of beneficiaries, I understand that:

- this nomination will replace any existing nomination made in respect of my ARC account
- the Trustee is not bound by this nomination but will take it into account in deciding how and to whom any death benefit will be distributed, and
- the Trustee can only pay a death benefit from the Fund to my Legal Personal Representative or one or more Dependant(s); meaning my legal or de facto spouse or other person with whom I am in a relationship where we are living together on a genuine domestic basis as a couple, my child (including adopted child, step-child, ex-nuptial child and child of a member's spouse), any person financially dependent on me or with whom I have an interdependency relationship at the date of my death. The Trustee is only able to pay another individual if no Dependants and no Legal Personal Representative can be identified.

Member signature

Date

11. CONTACT DETAILS

ARC Master Trust Customer Service Consultants

Call 1300 209 088

Monday to Friday 8.00am - 7.00pm (AEST/AEDT)

Email: customerservice@tal.com.au

Website: www.arcmt.com.au

Please return your completed Form and any supporting paperwork to:

ARC Master Trust, Reply Paid 5380, Sydney NSW 2001