Pension Membership application form



Before you sign this application form, the Trustee is obliged to give you a full copy of the Product Disclosure Statement (PDS).

The PDS will help you to understand the product and decide if it is appropriate for your needs. The latest version of the PDS has a publication date of 1 July 2025. If the PDS is not attached to, or accompanying, this application form, please phone 1300 13 44 33 to obtain a copy. When you have completed and signed the form, please return it to: GPO Box 4303, Melbourne VIC 3001.

*Title Mr Mrs Ms Miss Dr Other *Surname	*Date of birth /				
*Given names					
*Residential address					
*Suburb	*State *Postcode				
*Indicates fields that MUST be completed. *Indicates fields that MUST be completed. *Indicates fields that MUST be completed. If you are aged under 60 you need to complete an Australian Taxation Office Employment Declaration/Tax File Number Notification form.					
In order to be eligible to transfer your nominated superannuation amount (as specified in Step 4) to an REI Super pension, you must be an Australian Permanent Resident, New Zealand Citizen or Australian Citizen and meet one of the below conditions of release. I declare that I am an Australian Permanent Resident, New Zealand Citizen or Australian Citizen and meet the condition of release that I have selected below. Select a condition of release. If you are applying for a Transition to Retirement Pension, you are only eligible if you have reached age 60 and have not permanently ceased gainful employment. I have reached age 60 but not age 65, have not permanently ceased paid full time or part time work of at least 10 hours per week (and intend to continue working until further notice) and am applying for a Transition to Retirement Pension.	I have reached age 60, have ceased gainful employment and do not intend ever again to become gainfully employed for 10 hours a week or more. I am aged 60–64 and on or after reaching age 60 have ceased an arrangement under which I was gainfully employed I am aged 65 or over I am permanently incapacitated (and my super is already classified as 'unrestricted non-preserved') Note: we may seek supporting evidence in respect of your selection. 'Gainfully employed' means employed or self-employed for gain or reward in any business, trade, profession, vocation, calling, occupation or employment.				









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If you are a temporary resident of Australia contact us on 1300 13 44 33.

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STEP 4: TRANSFER INFORMAT Please provide details of the source of your REI Super, it is a requirement that you retain	Account Base				
Transfer from my existing REI Super ac					
My total REI Super account balan			II but \$5,000 d	of my REI Super account balance OR	₹
Amount to be transferred \$,		,	
Transfer from another super fund. Plea	ase complete	and return the Rollover Form prov	ided with the	PDS.	
Note: if you transfer the total of your REI Su accumulation account will be closed and ar financial advice from an appropriately qual	iper accumula ny insurance d	ation account balance, or other acc cover you have will cease. Please er	umulation ac sure your cor	count balance, to an REI Super Pens nsider the impact of any transfer an	
You can choose any one or more investment invested in our Default Investment Strategy further details in relation to the investment. The total of your choices must add up to 10 Default Investment Strategy will apply to you	t options up t y for pension a t choices avail 10% for it to b	accounts. You should refer to the H lable to pension accounts (if you do e a valid choice. If you choices do n	ow your REI S o not wish to I ot add up to 1	uper Pension is invested section of be invested in the Default Investme	the PDS for ent Strategy).
Growth Plus	%	Cash	%	Global Property	%
Growth	%	Australian Shares	%	Australian Property	%
Balanced	%	International Shares	%	Bonds	%
Stable	%			TOTAL	100%
2. Choose your pension amount Please select one of the following options: (Maximum Allowable Pension OR Minimum Allowable Pension OR 3. Choose the investment options from If you have nominated more than one invest payment to be deducted from your chosen or we are unable to implement your nominwith the percentages you have nominated a specified order, starting with the Cash options.	Pleas (Note \$ n which to c tment option investment option ation for any above in Step	aximum Allowable Pension' option se pay me the following gross amoust ex must be between the Minimum an fraw your pension payments a (see Step 5, Investment Choice, ab ptions. The total of your choices may reason, REI Super will deduct your 5. If you're invested in the Default	unt before tax d, where appli pove), you can ust add to 100 pension paym Investment St	choose the proportion of each pen orbits from your account balance in crategy, your pension payments will ents will be made from the Balance	sion ake a choice, accordance I be made in
Growth Plus	%	Cash	%	Global Property	%
Growth	%	Australian Shares	%	Australian Property	%
Balanced Stable	%	International Shares	%	Bonds TOTAL	100%
4. Please pay my pension to the follow Note: you must nominate an account held Institution Branch address Suburb Account Name	_		EFT)	State Posto	
BSB number	Account nu	mber			



> STEP 7: NOMINATION OF BENEFICIARIES

Non-Binding Nomination of Beneficiaries

To assist the Trustee in determining who should receive any lump sum payable from the Fund in the event of your death, you should complete this section. It is not binding on the Trustee, but your wishes will be deeply considered before any alternative decision is made. If you wish to make a Binding Death benefit Nomination for your Pension account please complete the binding death benefit nomination form available on our website at reisuper.com.au. If you wish to make a Reversionary Beneficiary nomination see the next page. You should only make one type of nomination for your account. See the PDS for information about what happens if you make more than one type of nomination for your account.

Please write below the name(s) of the dependant(s) that you want to receive your superannuation and insurance (if any) if you die. Don't forget to write down what percentage of your benefit you would like each dependant to be paid. The percentages must add up to 100%.

Alternatively you may nominate the legal personal representative(s) of your estate. Write their name(s) below and place 'legal personal representative' under Relationship to you. If you have not made a will, you should make one out preferably by visiting a qualified legal practitioner who can advise you.

You should update all nominations and your will as soon as your circumstances change, for example, as a result of your divorce, remarriage, separation from long-term partner or death of any nominated person.

A **dependant** is defined in superannuation law and includes your spouse (including de facto), your child (including step child, adopted child or ex-nuptial child) or other person financially dependent on you at the time of your death. For more information in relation to dependants, refer to **Definition of dependants** on page 29 of this PDS.

Who qualifies as your **legal personal representative(s)** is also defined in superannuation law but basically refers to the executor(s) of your will or the grantee(s) of probate of your will or the grantee(s) of what are called letters of administration of your estate (obtainable from court by appropriately `close' people to you but at some cost, should you die without having made a will).

If I die while a member of the Fund, I wish for my benefit to be paid to my dependant(s) and/or legal personal representative listed below. If you wish to nominate more than 4 beneficiaries (dependants and/or legal personal representatives) contact us.

1. Full name			
Residential or if applicable, Business address			
Suburb		State	Postcode
Relationship to you	Date of birth		Proportion of benefit
	,		%
	,		70
2. Full name			
Residential or if applicable, Business address			
Suburb		State	Postcode
Relationship to you	Date of birth		Proportion of benefit
	, ,		%
			/0
3. Full name			
3.1 uli liame			
Residential or if applicable, Business address			
Residential of II applicable, business address			
Suburb		State	Postcode
Subul D		State	rosicode
Relationship to you	Date of birth		Proportion of benefit
Relationship to you	Date of birtii		rioportion of benefit

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STEP 7: NOMINATION OF BENEFICIARIES CONT						
4. Full name						
Residential or if applicable, Business address						
Suburb	State Postcode					
Relationship to you	Date of birth Proportion of benefit					
	/ / / %					
	TOTAL MUST ADD UP TO					
OR:	TOTAL MOST ADD OF TO					
Reversionary Beneficiary Nomination (A valid reversionary beneficiary nomination means your Pension will continue to be paid after your death, subject to superannuation laws. See page 29 of PDS. Note: You can only nominate one reversionary beneficiary to receive your Pension upon your death. Your nominated beneficiary must be an eligible dependant at the date of death. You cannot nominate a legal personal representative. 1. Full name						
Relationship to you Da	ate of birth					
Relationship to you	, , , , , , , , , , , , , , , , , , ,					
I have attached a certified copy of my driver's licence or passport OR I have attached certified copies of BOTH : Birth/Citizenship Certificate OR Centrelink Pension Card AND Centrelink payment letter, OR Commonwealth or State/Territory Gov and address	rernment or local council notice, OR utility bill (<1 year old), with my name					
STEP 9: DECLARATION AND SIGNATURE Your signature below indicates that you have read, understood and agree to	to the following statements:					
 I apply to become a member of REI Super Pension on the terms and conditions contained in the Trust Deed and Rules of the Fund. I understand that the Trust Deed and Rules can be inspected on request. I have received and read the information provided to me about the Fund, in particular, the Product Disclosure Statement and any Supplementary Product Disclosure Statement. The choices I have indicated on this form will remain in force until I advise the Trustee otherwise, with the effective date of change being as advised by the Trustee. The information that I have supplied on this application form is true and correct at the date of signing, and I will notify the Trustee immediately if any of this information changes. I consent to the Fund providing me with information about benefits provided by third parties. (If you do not want information sent to you, please tick this box). 	 I acknowledge that the Trustee may use my email address and/or mobile phone number (if provided) to send me information, including member product disclosure documentation and marketing material digitally. This information may be sent by email with an attachment or may include a link to a website from where it can be downloaded. I also acknowledge that should I wish to receive all documentation by mail rather than email, I can update my preferences by logging into my account or by calling REI Super. I understand and consent to my information being collected, disclosed and used in the manner set out in this form. I understand that investment returns are not guaranteed, and the value of my investment in the Fund may rise or fall. I understand that fees and costs apply to each pension account I hold in the Fund and that these fees and costs are additional to any fees and costs applicable to any other account I hold in the Fund. I have read and understood the Privacy Policy which is available at reisuper.com.au/privacy-policy and I consent to my personal information being collected and used by REI Super in accordance with this policy. 					
*Signature	*Date					
X						

* Indicates fields that MUST be completed.