

ClearView Family Fee Discount Election Form

Please complete this form if you and your family would like your investments in one or more of the products detailed on page 2 of this form to be counted for the purposes of the ClearView Family Fee Discount.

Your Details

OFFICE USE ONLY Identity number

You

Mr Mrs Miss Ms Other

Given name(s) Surname

Male Female Date of Birth / /

Home phone number () () Work phone number () ()

Mobile Email

Address
 Suburb Postcode
 State Country

Your Family's Details

Members of your family are:

- Your father/mother
- Your son/daughter
- Your sister/brother
- Your spouse (including de factos, but excluding same sex partners)

Family's Member 1

OFFICE USE ONLY Identity number

Mr Mrs Miss Ms Other

Given name(s) Surname

Male Female Date of Birth / /

Home phone number () () Work phone number () ()

Mobile Email

Address
 Suburb Postcode
 State Country

Relationship of family member to you:

Family Member 2

OFFICE USE ONLY Identity number

Mr Mrs Miss Ms Other

Given name(s) Surname

Male Female Date of Birth / /

Home phone number () () Work phone number () ()

Mobile Email

Address
 Suburb Postcode
 State Country

Relationship of family member to you:

Family Member 3

OFFICE USE ONLY Identity number

Mr Mrs Miss Ms Other

Given name(s) Surname

Male Female Date of Birth / /

Home phone number () () Work phone number () ()

Mobile Email

Address
 Suburb Postcode
 State Country

Relationship of family member to you:

Family Member 4

OFFICE USE ONLY Identity number

Mr Mrs Miss Ms Other

Given name(s) Surname

Male Female Date of Birth / /

Home phone number () Work phone number ()

Mobile Email

Address
 Suburb Postcode
 State Country

Relationship of family member to you:

Family Member 5

OFFICE USE ONLY Identity number

Mr Mrs Miss Ms Other

Given name(s) Surname

Male Female Date of Birth / /

Home phone number () Work phone number ()

Mobile Email

Address
 Suburb Postcode
 State Country

Relationship of family member to you:

Additional Family Members

If there are additional members of your family that you would like to include, please attach their details, as per the above, to this form. Any additional family members must also sign the Declaration on page 3.

Investments Held by You and Your Family

Please list below the investments held by you and your family that you would like included for the purpose of determining whether you qualify for the family fee discount.

Only investments held in the following products can be included for family fee discount purposes.

- ClearView Pension Plan
- ClearView Superannuation and Roll-overs
- ClearView Managed Investments

Product	Account/Investment Number	Ownership Of Account/Investment
e.g. ClearView Pension Plan	750000000	Mrs G. Walters

Privacy and Your Personal Information

Collection, Use and Disclosure of your Personal Information.

Your personal information needs to be collected, used, and disclosed in order to process and administer your investments and to calculate and offer benefits and discounts. You can choose not to provide your personal information, but this may affect our ability to do these things.

By providing your personal information to us you acknowledge, declare that and consent to the following:

1. We can collect and use your personal information so your current and any further investment can be processed and administered and so we can calculate and offer you benefits and discounts;
2. For these purposes we can collect your personal information from, and disclose it on a confidential basis to: our related entities; our agents; government departments and agencies; investigators; lawyers; advisers; and the agent of any of these, even if the disclosure is to an organisation overseas which is not subject to privacy obligations equivalent to those which apply to us; and
3. Where you provide personal information to us about another person, you are authorised to provide that information to us, and that you will inform that person who we are, that we will use and disclose their information for the purposes set out in points 1 and 2 above, and that they can gain access to that information (unless doing so would pose a serious threat to the life or health of any individual).

Access to your Personal Information

You may access information which we hold about you at any time by contacting us on 1800 265 744.

Marketing Purposes

We are committed to providing you with access to a range of leading products and services. In order to do this we will use your personal information to offer you other products and services. We may disclose your personal information on a confidential basis to our related entities in the ClearView Group of Companies so that they can also offer you products and services.

By providing your personal information to us you acknowledge that, and consent to:

- unless you ask us not to, our collecting and using your personal information to contact you for market research and to provide you information and offers about products and services offered by us, our related entities in the MBF Group, and other organisations whose products and services we promote;
- unless you ask us not to, us disclosing your personal information on a confidential basis for these marketing purposes to our related entities in the MBF Group, and other organisations whose products and services we promote and to any agent of these; and
- you will inform us if you do not want your personal information to be used, or disclosed for these marketing purposes.

Please call us on 1800 265 744 if you have any questions, comments or concerns regarding privacy matters.

Declaration

This declaration must be completed by you and all members of your family who have provided account / investment details on or with this form.

I/We acknowledge that the information provided on this form is true and complete, and consent to the collection, use and disclosure of my/our personal information as set out in the Privacy and your personal information section of this form.

You

Given name(s) Surname

Signature 1

X

DATE / /

Your Family Members

Given name(s) Surname

Signature 2

X

DATE / /

Given name(s) Surname

Signature 3

X

DATE / /

Given name(s) Surname

Signature 4

X

DATE / /

Given name(s) Surname

Signature 5

X

DATE / /

Given name(s) Surname

Signature 6

X

DATE / /



This form can be posted (no stamp required) to:

ClearView
Client Operations
Reply Paid 4232
Sydney NSW 2001



If you have any questions about this form,
please call us on

132 977