

Retirement Declaration Form

ALL SECTIONS MUST BE COMPLETED

PLEASE ☒ NOT ☐

PLEASE USE BLOCK LETTERS



Please complete this form if you wish to notify Club Super that you have retired or ceased work on or after age 60.

ARE YOU A MEMBER OF CLUB SUPER?

☐ YES ☐ NO If YES, Member No:

Note: if you have changed your name since first becoming a member please attach a certified copy of your Marriage Certificate, Deed Poll or a Statutory Declaration as proof.

PERSONAL DETAILS

Date Of Birth Gender

Title ☐ Mr ☐ Mrs ☐ Miss ☐ Other Specify if Other

First Name

Middle Name

Family Name

Home Address

Street Number Street Name

Suburb/Town

State Postcode

Postal Address (If Same As Above, Write "As Above")

Street Number Street Name

Suburb/Town

State Postcode

Contact Details

Email

Phone

Mobile

DECLARATION

- ☐ I declare I am of preservation age and have permanently retired from the workforce. I have no intention of resuming gainful employment in the future.
- ☐ I declare I am over the age of 60 and have ceased gainful employment since reaching the age of 60.
- ☐ I request the conversion of my existing Transition to Retirement Account to a Retirement Income Account.

Date of Birth	Preservation Age
Before 1 July 1960	55
1 July 1960 – 30 June 1961	56
1 July 1961 – 30 June 1962	57
1 July 1962 – 30 June 1963	58
1 July 1963 – 30 June 1964	59
After 1 July 1964	60

Full Name

Date of termination of employment (if applicable)

I have read this form and I declare that the information I have provided in it is true and correct to the best of my knowledge and belief.

Your privacy is important to us

When your personal details are provided to Club Super, they are securely stored and accessible only to authorised personnel and third parties for the purpose of administering your account. If you would like to see Club Super's Privacy Policy visit clubsuper.com.au or call us on 1300 369 330 for a copy of the Privacy Policy.

Signature

Date

SIGN HERE

PLEASE ENSURE YOU HAVE COMPLETED ALL RELEVANT SECTIONS OF THIS FORM.

RETURN COMPLETED FORM TO: CLUB SUPER PO BOX 10726 BRISBANE ADELAIDE STREET QLD 4000

OR EMAIL A SCANNED COPY OF THE COMPLETED FORM TO: info@clubsuper.com.au