



ADVISER SERVICES FORM

This is the form you should fill if you have a financial adviser and would like them to have access to your account details. You can also use this form to make an adviser service fee payment to your financial adviser, with the fee paid to your financial adviser out of your super account balance.

This form must be posted to Cruelty Free Super GPO Box 263, Sydney, NSW 2001

Section 1 Personal details

Given Name(s)	<input type="text"/>				
Surname	<input type="text"/>				
Date of Birth	<input type="text"/>				
Member Number	<input type="text"/>				
Phone number	<input type="text"/>				
Email address	<input type="text"/>				
Address	<input type="text"/>				
	<input type="text"/>				
City	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>

Section 2 Financial Adviser Details

Adviser name	<input type="text"/>				
Adviser dealer group	<input type="text"/>				
Phone number	<input type="text"/>				
Email	<input type="text"/>				
Registered office (Physical address)	<input type="text"/>				
	<input type="text"/>				
City	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>



Section 3 Adviser Service Fee

An adviser service fee is a fee agreed to between you and your financial adviser, made as payment for financial advice that you have received. The fee is paid from your superannuation account balance. This fee can be removed at any time in the future by either yourself or your financial adviser. Adviser Fees are calculated and paid monthly.

Adviser Service fees are paid as a percentage of your account balance.

I agree to pay an adviser service fee of ____% of my account balance per annum (maximum 1.1% per annum including GST).

If you are an adviser and will be receiving a fee please also complete and Adviser and Dealer registration form.

Section 4 Adviser Declaration and Signature

By providing your (Financial Adviser) details and signing above, you:

- Declare that you are properly authorised to provide financial services in relation to the Cruelty Free Super account held by the member.
- corroborate that where any advisory service fees are paid from a member account to you, these fees have been agreed with the member and are a reasonable amount for the financial advice supplied
- acknowledge that the Administrator has the discretion to reject any request to pay adviser service fee in order to comply with its responsibility under superannuation law

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Signature of Financial Adviser

...../...../.....
Date

Section 5 Member Declaration and Signature

By completing and signing this form I declare that I:

- have read and understood the Product Disclosure Statement, Additional Information Booklet, and Insurance Guide which contain important information regarding my superannuation with Cruelty Free Super
- The adviser I have indicated on this form can have access to my Cruelty Free Super account information and is authorised to operate on my account, and this will continue until I inform the Administrator that it no longer applies
- understand that Cruelty Free Super may cancel or vary the terms of this appointment by giving me fourteen (14) days' notice
- have authorised a fee to be paid to my financial adviser as directed above, and this fee will be paid from my super account
- declare that all details in this form are true and correct and I agree to release, discharge and indemnify the Cruelty Free Super, Trustee and the Administrator from and against all losses, actions, liabilities, claims, demands and proceedings arising from my appointment of a financial adviser and that neither I nor any person claiming through me, will have any claim against any of them in relation to any transaction or dealing made by or at the direction of my Financial Adviser

I have read, understood and agree to the above declaration.

x

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Signature

...../...../.....
Date