

# Investment Choice Form Pension Member



Please complete and Return Form to: Christian Super, Locked Bag 5073, Parramatta NSW 2124  
Internet. [www.christiansuper.com.au](http://www.christiansuper.com.au)

Please write in BLOCK letters and use a BLUE or BLACK pen. This request will be invalid if unsigned or incomplete.

Complete this form if you would like to change your investment option. Please note that confirmation of your investment switch will be sent to you within 7 days of us actioning your switch. Please check this carefully and contact us immediately if it does not reflect the instructions you provided on this form.

## MEMBER DETAILS (Please complete in full)

Member Number			
<input type="text"/>			
<i>(This can be found on your Member Statement)</i>			
Mr/Mrs/Ms/Miss	Surname		
<input type="text"/>	<input type="text"/>		
Given Names			
<input type="text"/>			
Date of Birth (ddmmyyyy)			
<input type="text"/>			
<b>Street Address</b>			
Street Number	Street Name		
<input type="text"/>	<input type="text"/>		
Suburb	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
<b>Postal Address (if different)</b>			
Street Number / PO Box	Street Name		
<input type="text"/>	<input type="text"/>		
Suburb	State	Postcode	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Telephone (daytime)	Mobile		
<input type="text"/>	<input type="text"/>		
Email			
<input type="text"/>			

Please turnover to complete and sign this form ➤



