Super SA Select Application Form



Please complete this form in **BLOCK LETTERS** using a **BLACK PEN** and return the signed original form to Super SA via post or email.

Please note To be eligible to receive contributions from a non-SA Government employer into Super SA Select, a person must hold at least one of the following Super SA accounts (and continue to do so to maintain ongoing eligibility):

a) an open Triple S account with a balance greater than \$0 (excluding spouse members and non-member spouses)

b) an open Super SA Select account to which SA Government employer super contributions are required to be directed (i.e. no fund selection has been made out of Super SA Select).



There are two ways to join Super SA Select;

• Fund Selection – This is where you choose to direct contributions related to South Australian Government employment to Super SA Select by way of a fund selection notice form

• Non - SA Government Employer Contributions – This is where you choose to direct contributions related to Private Sector (non-SA Government) employment to Super SA Select.

For further information please refer to the Super SA Select PDS.

1. Personal details

Title	Given Name(s)						
Surname					Date of birt	:h	
					D D /	MM	/ Y Y Y Y
Mobile phone*		Work phone		H	ome phone		
Email address*							
Residential address							
Suburb					Sta	ate	Postcode
Postal address							
Suburb					Sta	ate	Postcode

* By providing your email address and/or telephone number(s) you are agreeing to receive, from Super SA, or an organisation on behalf of Super SA, marketing communications including newsletters, announcements, invitations or surveys. You may opt out of these marketing communications at any time by updating your communication preferences in our online member portal or by contacting Super SA. If you opt out of marketing communications, you will still receive important account information from us.

2. Tax File Number

Supplying your TFN to Super SA Select is optional. However, if you choose not to supply your TFN:

- Tax at the top marginal rate plus medicare levy will be deducted from your employer and salary sacrifice contributions.
- You may not receive a co-contribution or Low Income Super Tax Offset.

Tax File Number

If you provide your TFN it will only be used for legal purposes and it will assist in finding and identifying your super entitlements now and in the future. Declining to provide your TFN is not an offence.

3. Investment options

Please refer to the Investment section of the Super SA Select Product Disclosure Statement (PDS) to assist you in selecting an investment option. Select the percentage you wish to invest in each option below in **whole percentages**. If you do not select an option your money will be invested in the Balanced option.

Balanced	%	Cash	%	TOTAL	= 100 %	
					N (N	



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How to contribute

After-tax

- Download and complete the Change to after-tax contribution rate form
- **Salary Sacrifice**
- Download and complete the Salary Sacrifice for

- Send it to Super SA

- Superannuation form
- Forward it to your payroll office

SA Police Officers, SA Ambulance Operational staff and SA Ambulance Service Superannuation Scheme members ONLY: - You are required to make contributions to your superannuation as a percentage of your salary.

- Download and complete the "My regular superannuation contributions" form.
- Send it to your Payroll office.

4. Applicant Declaration

I hereby apply to become a member of Super SA Select and declare that:

- I have read and accept the Super SA Select PDS and related information.
- I understand that the Southern Select Super Corporation, as Trustee, will invest my super according to my choice of investment option or options and I accept full responsibility for my investment choice and acknowledge that I am aware of the consequences of making such an election.
- I understand/acknowledge that any of my personal information, including but not limited to medical, non-medical and employment information, can be exchanged between Super SA Select and Triple S.
- The information supplied on this form is true and correct.

- I understand that as a member of Super SA Select I am bound by the rules set out in the Trust Deed and Rules.
- I understand that the Super SA Select PDS represents a summary of the terms and conditions under which the Southern Select Super Corporation, as Trustee, offers this product and that the complete terms and conditions are set out in the Trust Deed and Rules. The terms and conditions are subject to any changes in Commonwealth Acts and Regulations.
- I understand that the Super SA Select PDS is a general guide and does not contain personal financial advice.
- I understand that Super SA may use the information I have provided to send me extra information about my super or to conduct surveys regarding current or future services.

Signature 🗶

Date

Please complete all the details on this form and return the signed original to Super SA via post or email.

Contact us

🕲 EMAIL supersa@sa.gov.au, or

(POST GPO Box 48, Adelaide SA 5001

WEBSITE supersa.sa.gov.au

(E) **PHONE** 1300 369 315

MEMBER CENTRE (by appointment only) 151 Pirie St, Adelaide, SA 5000