APPLICATION TO CHANGE

# Income Protection

INSURANCE COVER

AMISTSUPER
AUSTRALIAN MEAT INDUSTRY SUPERANNUATION TRUST

Complete this form in BLACK ink using BLOCK letters | any request will be invalid if not signed and dated. Please mail this form to: AMIST Super, Locked Bag 5390, Parramatta NSW 2124 or fax to 1300 855 378 or email to service@amist.com.au

## Member details

AMIST Membership Number

Date of birth (dd/mm/yyyy)

Mr/Mrs/Ms/Miss

Surname

Given Names

Street Number / PO Box

Street Name

Suburb

State

Postcode

Telephone (Home)

Telephone (Mobile)

Email

## Do you want to increase your cover?

If you earn more than $32,000 per year, you have the opportunity to increase your cover. If you do this within 60 days of receiving your Welcome Letter from us, increased cover will also be automatic with no questions asked.

Remember, cover can only be for a maximum of 75% of your current average pay. Cover can be purchased in single units, each offering an additional $500 in cover per month. Please see the table on page 19 of this Member Guide and select the level of cover that best suits your needs.

I have 4 units of Income Protection insurance and would like a further ☐☐ units to make a total of ☐☐ units.

Sign here

Signature of member:

Date (dd/mm/yyyy)

## Are you an office worker?

Please tick the box if you are an office worker and return the form to us.

☐ **Yes**, I am an office worker

Office Workers (defined as "White Collar" in the insurance policy) are members who perform only non-manual duties and work at least 75% of the time in an office environment and have done so for the last 12 months.

Sign here

Signature of member:

Date (dd/mm/yyyy)