□legalsuper

Retirement Declaration form

Please use **BLOCK LETTERS** and **BLACK INK** when completing this form. If you have any questions in relation to completing this form, please contact legalsuper on **1800 060 312** (8am to 8pm [AEST] Monday to Friday) or at **mail@legalsuper.com.au**. This form will be invalid if unsigned or undated by you (see Section 4).

Return this completed form to either:

Email: mail@legalsuper.com.au

OR

Post: legalsuper Locked Bag 5081 Parramatta NSW 2124 Phone: 1800 060 312

1. Personal details	2. Retirement declaration
Membership number	I declare that I am:
Date of birth (dd/mm/yyyy)	A. of preservation age* or over and have permanently retired**
Date of Briting (darining yyyy)	B. age 60 or over and have ceased an employment arrangement after turning 60
Mr Mrs Ms Miss Dr Justice	C. age 65 or over (NB: you can still be working)
Surname	* Your preservation age will be between 55 and 60 depending on your date of birth. Please refer to your legalsuper Product Disclosure Statement for further information.
Given names	** Permanently retired is defined as never being gainfully employed again for more than 10 hours per week. Gainful employment means employed or self-employed for gain or reward in any business, profession, calling, occupation or employment.
Street/Unit No.	
	3. Privacy & Authorisation
Street name	Privacy
	Please note that by sending legalsuper personal information about yourself, you are agreeing to the following:
Suburb/Town/City State Postcode	 That you have read the legalsuper Privacy Policy and understand how legalsuper intends to protect your personal details, particularly in relation to the collection, storage, quality, use and disclosure (sharing) of personal information;
	2. That legalsuper can use it for the purposes of running your superannuation account.
Occupation Telephone (daytime contact)	If you would like more information on privacy law requirements or a copy of legalsuper's Privacy Policy, please call legalsuper on 1800 060 312 (8am to 8pm [AEST] Monday to Friday) or visit legalsuper.com.au
Email	4. Declaration
	I declare that:
	 The information contained in this form is true and I acknowledge that responsibility for its completeness and accuracy is mine; and
Trading name of last employer to contribute to legalsuper on your behalf	 I agree, and have previously agreed, that my superannuation held in legalsuper is governed by the terms and provisions of the legalsuper Trust Deed as in force from time to time.
Is this your current employer?	Member's signature
Yes No	
Date left employment (if applicable) (dd/mm/yyyy)*	
	Date (dd/mm/yyyy)
* Please provide this date if you tick box 2A or box 2B below.	
	Please note that any transfers/switches from a legalsuper Transition to Retirement Pension to a legalsuper Pension will count towards, and be subject to, your Transfer Balance Cap. We strongly recommend you seek the advice of a licensed financial adviser before making such a transfer/switch.