



### 3. Tell us the type of beneficiary nomination you want to make - don't fill out this section if you're cancelling your nomination

- I want to make a new or change an existing binding nomination. We must pay your benefit to the people you nominate. You need two witness signatures in the witness signature box in Section 4 below.
- I want to renew a binding nomination before it expires. We must pay your benefit to the people you nominate. You do NOT need to have this form witnessed. **NOTE:** you still need to list your beneficiaries below and they must be the same as your current ones. If you list different beneficiaries it will be treated as a new nomination and you will need to have the form witnessed.
- I want to make a non-binding nomination. We'll decide who to pay your super and any insurance proceeds to, only using your nomination as a guide. Sign Section 4 of the form but you don't need to have it witnessed.

### 4. Nominate your beneficiaries

You can only nominate the executor of your estate and / or your dependants. To nominate a beneficiary, mark 'X' in one or both of the boxes below. Please write the percentage that you want to be paid to each beneficiary. Your benefit can be paid in any percentage to your estate and / or beneficiaries but the total must equal 100%.

I want to nominate the individual(s) listed below.

Beneficiary's full name	Relationship				% of benefit
	<input type="checkbox"/> Spouse	<input type="checkbox"/> Child	<input type="checkbox"/> Financial dependant	<input type="checkbox"/> Interdependent	%
	<input type="checkbox"/> Spouse	<input type="checkbox"/> Child	<input type="checkbox"/> Financial dependant	<input type="checkbox"/> Interdependent	%
	<input type="checkbox"/> Spouse	<input type="checkbox"/> Child	<input type="checkbox"/> Financial dependant	<input type="checkbox"/> Interdependent	%
	<input type="checkbox"/> Spouse	<input type="checkbox"/> Child	<input type="checkbox"/> Financial dependant	<input type="checkbox"/> Interdependent	%

and / or  I want to nominate the executor of my estate.

The following percentage of my benefit will be paid to my estate:  %

**Must add up to TOTAL 100%**

To read more about making a nomination, read our **Nominating Beneficiaries** factsheet at [teamsuper.com/resources](https://teamsuper.com/resources)

### 5. Your declaration

I understand that:

- if my beneficiaries are no longer dependants, they pass away before I do or Team Super can't find them, Team Super will pay my benefit to someone else they consider appropriate
- if I have a binding nomination this will remain in place for three years from when my two witnesses (new nominations only) and I sign this form. After three years the nomination will cease, but Team Super may still use the information to help find possible beneficiaries
- if there's an error with my form, by law it can't be considered a binding nomination. When Team Super receives my form they'll undertake an initial review and if they find an error I'll be advised of this.
- if my nomination is binding it'll replace previous nominations. If this nomination is non-binding, it won't replace a binding nomination.
- I can change or cancel this nomination at any time in writing by completing another Nominate your beneficiaries form.

Your signature	Today's date (DD-MM-YYYY)
<input type="text"/>	<input type="text"/>
Print name	
<input type="text"/>	

#### To make your nomination binding, it must be witnessed by two people (new nominations only)

- If this section isn't completed no beneficiaries will be listed on your account.
- Your witnesses must sign and date this form at the same time as you.
- If you nominate your 'Estate' as a beneficiary, your executor or a beneficiary under the Estate can't also be your witness.

I declare that:

- I'm at least 18 years old; I'm not listed as a beneficiary above; and the person named in **Section 2. Your personal details** signed the above declaration in my presence.

Witness 1 signature	Print name	Today's date (DD-MM-YYYY)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Witness 2 signature	Print name	Today's date (DD-MM-YYYY)
<input type="text"/>	<input type="text"/>	<input type="text"/>

**When complete return this form to us by:**

**Post** Team Super  
Locked Bag 2020 Newcastle NSW 2300  
**Email** [help@admin.teamsuper.com](mailto:help@admin.teamsuper.com)  
(non-binding beneficiaries only)