



Employer application or change of details

Complete this form to become a registered employer of Prime Super or to update your details.

Please complete in pen using BLOCK letters. Print 'X' to mark boxes where applicable. This form must be completed in full.



primesuper
surprisingly straightforward

SAVE TIME! UPDATE YOUR DETAILS **Online** @ primesuper.com.au

✓ Tick the box

Join Prime Super Update your details

Employer Number (if you are already registered)

Section 1 – Employer details

Employer name

Trading name

ACN

ABN

Industry

Postal address

Town/Suburb/City

State

Postcode

Phone number (BH)

Mobile

Contact name

Contact position

Email

Section 2 – Making contributions

Contribution frequency

Please advise the frequency with which you intend to make payments. Please tick the box below.

Quarterly Monthly



Section 3 – Industry specification

Please specify the industry in which your company operates (eg, farming, retail, nursing, etc)

Prime Super provides a separate 'Health division' for members and employers who work in the health, aged care and related industries.

Tick the box to indicate if your company operates in the health sector.

My company operates in the health, aged care and related industries (eg, medical services, aged care, surgical, pharmaceuticals, etc)

Section 4 – Declaration

I/We Agree to be bound by the Trust Deed as amended from time to time, governing the superannuation fund known as Prime Super.

I/We agree to provide the Trustee with all information and to do all such things as the Trustee requires to comply with the Superannuation Guarantee legislation.

I/We declare that the details in this form are true and correct.

I/We declare that if I/We have applied to join the **Health** division that I/We operate in the health, aged care or related industries and am/are eligible to join the **Health** division of Prime Super.

Full name

Employer signature

Date (DD/MM/YY)

Next steps

If you are registering as a new Prime Super employer and want to arrange for your employees to join Prime Super, please also complete and return a **Prime Super employee schedule** to us. This form will enable us to admit your employees to Prime Super after which they will receive a **New member welcome kit**. Download the form from primesuper.com.au. If any of your employees are already members of Prime Super, we will identify this on our system and they will be added to your file.

Once completed return this form to us via mail, fax or email and we will be in touch.

Return this form to us via mail, email or fax.

mail Prime Super
Reply Paid 85860
PARRAMATTA NSW 2124

No stamp required

email administration@primesuper.com.au

fax 1800 023 662

visit primesuper.com.au

or call 1800 675 839