



This form is to be completed by any employer or family wishing to participate in AXA Workplace Rewards and Family Programme. Please complete only the section relevant to you. If it is a combination of both, please complete the workplace section.

Workplace details

Workplace name, ABN (Australian Business Number), Contact person, Position, Street number and name, Town/Suburb, State, Postcode, Phone number, Fax number, Email address

Family details

Contact person, Street number and name, Town/Suburb, State, Postcode, Phone number, Fax number, Email address

Adviser details

Adviser name, Adviser number, Mobile number, Fax number, Email address

Declaration

- On behalf of the company and/or family listed above I confirm that:
I would like to participate in the AXA Workplace Rewards and Family Programme for eligible employees, and/or family members.
I understand that endorsing the package does not constitute the provision of advice.
The employer or family member named above will not make specific product recommendations or provide individual advice to employees or other family members or contractors in relation to the products available under the AXA Workplace Rewards and Family Programme.
I acknowledge that the adviser named above, as a licenced adviser, is authorised to provide advice and service to our employees, contractors and family members.
Participation in AXA Workplace Rewards and Family Programme is subject to final approval by AXA.

Print full name of company or principal family member

Signature 1, Date, Signature 2, Date

- Signatures required: Principal family member and/or company representative as appropriate.
Company seal and two directors or director and secretary, or
Company seal and one signature noted as 'sole director and secretary' where the company has only one director, or
The signature of a person whose name is clearly written, with the words 'XXX for and on behalf of XYZ Pty Ltd.'

Note: Above not required if all members are family members.

Are any family members joining the Workplace Rewards and Family Programme in a bona fide living arrangement?

(a person in a bona fide domestic living arrangement is financially interdependent) Yes No

If yes, please provide signatures of the persons to be insured confirming that you are in a bona fide relationship.

Signature 1, Date, Signature 2, Date