

# Bendigo SmartStart Default Cover opt-in



**Complete this form if your balance is less than \$6,000 or you're under age 25 and you'd like to opt-in to receive default cover in your Bendigo SmartStart Super account.**

If you're eligible, you may elect to receive default cover in your Bendigo SmartStart Super account. We must receive your Default Cover opt-in form within 120 days from the date you joined the Plan. A contribution must also be received into your account by this date or your default cover will not commence.

We'll write to you to let you know the details of your default cover. For more information, read the Insurance Guide and Insurance section of your Product Disclosure Statement (PDS).

You can also use this form if you'd like to opt in to maintaining your default cover even if you don't receive a contribution into your account for a period of 16 months.

## How to opt in

Complete your details in the boxes below, sign and date the form, and return it to:

**Email:** [superannuation@bendigobank.com.au](mailto:superannuation@bendigobank.com.au)

**Post:** GPO Box 264  
Melbourne VIC 3001

Please complete in **black** or **blue** in using **CAPITAL LETTERS** (except for email addresses) and where provided, mark answer boxes with an **X**.

## Member details

Account number	<input type="text"/>
Employer name	<input type="text"/>
Title (Dr/Mr/Mrs/Ms/Miss)	<input type="text"/>
Surname	<input type="text"/>
Given name(s)	<input type="text"/>
Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/> (dd/mm/yyyy)
Email Address	<input type="text"/>

## Declaration

I elect to opt in to receiving eligible default cover through my super account if I'm under age 25 or my balance is below \$6,000.

I confirm I have read the PDS and am eligible for default cover having met the eligibility terms and conditions.

I understand that premiums will be deducted from my super account and that I can cancel my default cover at any time.

### Employer-sponsored division members

If I am a member of the Employer-sponsored division, I am employed with the employer named above and my employer contributions are being made by my employer to this account. I understand that my default cover will not commence if my account does not receive a contribution from this employer within 120 days of being eligible to join the Plan.

### Optional election due to inactivity

I elect to opt in to maintaining my default cover in my super account even if I don't receive a contribution into my account for a period of 16 months.

Signature

Date (dd/mm/yyyy)

For all enquiries please contact our Client Services team at:

**Email:** [superannuation@bendigobank.com.au](mailto:superannuation@bendigobank.com.au)

**Phone:** 1800 033 426