Change your details

1800 005 166

info@caresuper.com.au

GPO Box 1547, Hobart TAS 7001

Date of birth (DD MM YYYY)

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Section 3

Provide proof of identity

Only complete this section if you're changing your name, correcting your date of birth or updating your bank account details. The documents listed below must be in your new name if your name has changed.

Please verify your identity by choosing option 1 or 2.									
Option 1 – I want to use electronic verification									
By completing this section, I authorise CareSuper to use my details held for the purpose of confirming my identity. I understand that my details will be checked with the relevant official record holder through the use of third-party systems.									
Important: Make sure that the details you provide below exactly match your documents. If the details vary, we won't be able to verify your identity electronically.									
Provide details of any TWO of the following:									
1. Australian driver's licence Full name as appears on my driver's licence									
My Australian driver's licence number State of issue Expiry date (DD MM YYYY)									
Card issue number									
2. Medicare card Full name as appears on my Medicare card									
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My Medicare number Valid to (MM YYYY)									
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Colour of card									
Green Yellow Blue Your reference number on this card is									
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3. Australian passport									
Full name as appears on my passport									
My Australian passport number									
Option 2 – I want to use paper-based verification									
I've provided certified proof of identity with this form. Read our <i>Guide to providing proof of ID</i> fact sheet for more details.									
I authorise CareSuper to use my personal details for the purpose of confirming my identity if the paper copies of my certified identification documents are incorrectly certified, scanned or unable to be read. I understand that my details will be checked with the relevant official record holder through the use of third-party systems.									





Section 4 Only fill this section out if you want to change your bank account details. If you're adding or updating bank account details, you'll need to provide proof of your identity. Read our Guide to Your bank providing proof of ID fact sheet or call us for more details. details My new bank account details are: This will update your bank account for any withdrawals and pension payments you may be eligible to receive in the future. Account holder's full name - e.g. Jane Smith. The account must be held solely or jointly in your name. Payments can't be made to business accounts or third parties. **BSB** number Account number By signing this form I'm making the following statements: **Section 5**

Member declaration

- I declare the information is true and correct.
- · I understand that if I've changed my date of birth, this may impact my insurance benefits. I've considered this and don't require any further information.
- · I understand that if I've changed my bank details, CareSuper needs to receive the request at least three business days before my next scheduled payment date. Your details will generally be updated within three business days of receiving your request.
- I consent to the use of my personal information as outlined in CareSuper's Privacy policy available at caresuper.com.au/privacy-policy or by calling us on 1800 005 166.

Your signature	Date (DD MM YYYY)





Return the completed, signed and dated form via:

- upload using the Contact Us portal in Member Online
- email to info@caresuper.com.au
- mail to CareSuper, GPO Box 1547, Hobart TAS 7001