

Adviser registration form



Please use a dark pen and CAPITAL letters, or type directly into this form online, print it and send it to us. Use (X) to mark boxes.

Return the completed form to **adviserservicing@aware.com.au**

If you have any questions, please call us on **1300 046 615**.

Complete this form if you want to register to be an Aware Super Servicing Adviser. You cannot complete this form unless the Licensee that you are authorised to provide Financial Advice Services on behalf of has completed the Licensee Agreement including Schedules 1 and 2.

Once you have been notified that your registration is approved:

- you will be issued with an Aware Super Adviser Code
- you must complete your registration online in order to access the Adviser Portal
- clients can request you to be listed as their Servicing Adviser
- clients can request an advice fee be deducted from their Aware Super account for advice provided by you in relation to that account.

1: Adviser and practice details

Mr Mrs Miss Ms Dr
☐ ☐ ☐ ☐ ☐

Adviser last name (As shown on legal identification)

Adviser first name (As shown on legal identification)

Preferred name

ASIC Financial Adviser Authorised Representative Number

Date of birth (Required)

Adviser phone number (Required)

Adviser mobile number (Required for 2 factor authentication purposes)

Adviser email address (Required for online portal login registration)

Email address for general correspondence

Practice name

Practice ABN

Practice address

Suburb

State

Postcode

Practice phone number

2: Licensee details

Registered Licensee Name

[illegible]

AFSL Number

[illegible]

3: Acknowledgment and declaration

- I have read, understood and agree to the full Adviser Registration Terms and Conditions. I acknowledge that I may be subject to specific obligations under any contract between Aware Super and the Licensee.
- I will notify Aware Super as soon as practicable by email if I need to update the Authorised Officers that can request information about my client's Aware Super accounts.
- An advice fee payment request will meet the sole purpose test as provided in the Adviser Registration Terms and Conditions. That requires my advice to be solely in respect of my client's Aware Super accounts. For example, advice about contributions, withdrawals, rollovers, investments and insurance in respect of my client's accounts in Aware Super but excluding other advice such as advice about investment funds and gearing.
- I have read, understood, and agree to allow Aware Super to collect and keep my information confidential in accordance with its confidentiality obligations under any contract between Aware Super and the Licensee.

4. Signing

The Adviser may sign this document electronically and bind itself accordingly. In addition, the intention is to print it out when signed so that where a person prints it out, the first print-out by a person after all the signatory who is signing has done so, will also be an executed original counterpart of this document. The signatory confirms that their signature appearing in the document, including any such print-out (irrespective of which person printed it), is their personal signature.

Signature

Date signed

D D M M Y Y Y Y



Please sign and date form here.