

# Employer Registration Form



If you need to pay contributions to Emplus for any employees who are already members of Emplus, and you have not already registered with us, please use this form to register your details and obtain an employer number.

## Section 1: YOUR DETAILS

Employer Name:	<input type="text"/>		
ABN:	<input type="text"/>		
Contact Name:	<input type="text"/>	Contact Title:	<input type="text"/>
Postal Address:	<input type="text"/>		
Suburb:	<input type="text"/>	State:	<input type="text"/>
		Postcode:	<input type="text"/>
Street Address:	<input type="text"/>		
Suburb:	<input type="text"/>	State:	<input type="text"/>
		Postcode:	<input type="text"/>
Telephone:	<input type="text"/>	Fax:	<input type="text"/>
Email Address:	<input type="text"/>		

## Section 2: EMPLOYEE DETAILS

Please provide the details for any employees who are already members of Emplus and for whom you will be remitting superannuation contributions.

Full Name:	<input type="text"/>	Emplus Member Number:	<input type="text"/>
Full Name:	<input type="text"/>	Emplus Member Number:	<input type="text"/>
Full Name:	<input type="text"/>	Emplus Member Number:	<input type="text"/>
Full Name:	<input type="text"/>	Emplus Member Number:	<input type="text"/>
Full Name:	<input type="text"/>	Emplus Member Number:	<input type="text"/>
Full Name:	<input type="text"/>	Emplus Member Number:	<input type="text"/>
Full Name:	<input type="text"/>	Emplus Member Number:	<input type="text"/>

### Section 3: ACKNOWLEDGEMENTS and SIGNATORIES

1. I/We have read the current PDS and hereby apply to become a Participant in the Fund and agree to be bound by the provisions of the trust deed and the Rules constituting the Fund as amended from time to time [‘the Trust Deed’] and of this PDS.
2. I/We will provide the Trustee with any information relating to my/our participation in the Fund as and when requested, or upon any change to information previously advised.
3. I/We agree to the use of information by the Trustee in accordance with the privacy statement (available at [www.emplus.com.au](http://www.emplus.com.au))
4. I/We agree to contribute to the Fund on a regular basis to the extent permitted by government legislation and regulations.
5. I/We acknowledge that a user ID and password will be issued to the email address nominated above to enable access to MySuperSolution, an online portal for Emplus employers and members, and I/we accept the MySuperSolution Terms and Conditions. (refer below).

Full Name:	<input type="text"/>	Position:	<input type="text"/>
Signature:	<input type="text"/>	Date:	<input type="text"/>
Full Name:	<input type="text"/>	Position:	<input type="text"/>
Signature:	<input type="text"/>	Date:	<input type="text"/>

### Section 4: MYSUPERSOLUTION TERMS and CONDITIONS

It is important that you read and understand the following terms and conditions, and that you read the Fund’s Privacy Statement, before completing this form.

1. You must keep your password secure and confidential at all times. Any failure to keep your password secure and confidential may result in unauthorised access to your data. You should ensure that you update your password on a regular basis (no less frequent than monthly).
2. The MySuperSolution facility is provided by Admin Partners Limited (Admin Partners). The Trustee and the Fund Administrator of your superannuation fund have arranged for Admin Partners to provide this facility to Fund members, employers, and advisers. Neither the Trustee, Fund Administrator, nor Admin Partners warrant that the internet is a secure and confidential method of communication and you agree that you use the service at your own risk. All parties agree that all messages transmitted via MySuperSolution will have the same status that would apply if they were sent in writing, unless it can be shown that a message has been corrupted as a result of a technical failure or unauthorised interference.
3. In utilising the MySuperSolution service, you acknowledge that you have not relied in any way upon any representation or statement made by or on behalf of the Trustee, the Fund Administrator, nor Admin Partners, their employees or agents, or any descriptions, illustrations, specifications, skill or judgment of the Trustee, the Fund Administrator, nor Admin Partners, their employees or agents, and that you have satisfied yourself as to the condition and suitability of Emplus for your purposes. To the extent permitted by law, neither the Trustee, the Fund Administrator, nor Admin Partners has any liability for any direct or indirect loss or damage, suffered as a result of the use, misuse or non-use of MySuperSolution by you or anyone else.

**Please return this completed form to Emplus PO Box 3528, Tingalpa DC Qld 4173 or email [info@emplus.com.au](mailto:info@emplus.com.au)**

Phone: 1800 336 911 or 07 3899 7200 Fax: (07) 3899 7299 Website: [www.emplus.com.au](http://www.emplus.com.au)

**We are committed to respecting the privacy of the personal information you give us.**

Our formal Privacy Statement sets out how we do this. If you would like a copy of Emplus’ Privacy Statement, please let us know. We have published our Privacy Statement on our website at [www.emplus.com.au](http://www.emplus.com.au)