

# Third party authority

Use this form to give specific people, such as a relative or financial adviser, access to your account details. This could include any help you may need with claims.

Please use black or blue pen and CAPITAL letters. Use an X in boxes where required.



## Got a question? Talk to us

Our Advice Services team can give you advice on your super account over the phone. There's no extra cost to speak with the team as it's part of your membership. Visit [mediasuper.com.au/advice](https://mediasuper.com.au/advice) or call **1800 640 886** to find out more.

### Step 1: Provide your personal details

Media Super member number	Cbus Super Income Stream member number	
<input type="text"/>	<input type="text"/>	
Title	Date of birth	Gender
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="text"/>	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input checked="" type="checkbox"/> Male <input checked="" type="checkbox"/> Female
Given name(s)		
<input type="text"/>		
Family name		
<input type="text"/>		
Home phone	Work phone	Mobile
( <input type="text"/> ) <input type="text"/>	( <input type="text"/> ) <input type="text"/>	<input type="text"/>
<b>Residential address</b>		
<input type="text"/>		
Suburb/town	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Postal address</b> (if different from your residential address)		
<input type="text"/>		
Suburb/town	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email address (providing your email means you give permission for us to use it)		
<input type="text"/>		

### Step 2: Provide details of the third party

Do you want to give another person or practice access to your account? (Choose one option only)

Personal  **Go to Step 3a.**

Professional  **Go to Step 3b.**

### Step 3a: Give access to a person you have a personal relationship with

**Full name of third party**

Given name(s)

Family name

How is this person related to you? (choose one option only)

Partner  Parent  Guardian  Sibling  Other family member  Friend

Work phone

(  )

Mobile

**Address**

Postal address  Residential address

Suburb/town

State

Postcode

Email address

