

# Changes to ChildBuilder form

Generation Life Investment Bonds - ChildBuilder

## Guide to completing this form

- Use this form to change details for your ChildBuilder investment.
- Please use BLUE/BLACK ink and complete the applicable sections in BLOCK LETTERS.

### 1. Investor details

Client number (if known)









Account number









Investor name




Date (dd/mm/yyyy)

Nominated child's name

Nominated child's date of birth (dd/mm/yyyy)

### 2. Change nominated child vesting age or date

Change child vesting date

On attaining age

years old (10-25 years old)

**OR**

Set a vesting date, on

Vesting date must not be before the child's 10th birthday or after the child's 25th birthday.

### 3. Change access to investment proceeds

The following selection(s) will replace instructions previously given

**No restrictions on withdrawals**

The child will be able to access the investment immediately on vesting (default).

**OR**

**Annual maximum withdrawal limit**

You can nominate how and when funds can be accessed by the child.

Select a fixed dollar amount limit

p.a.

**OR**

Select % of investment balance limit

p.a.

**(Optional)**

Restrict withdrawals for the following number of years from vesting date

years

### 4. Declaration and signatures

I/We declare that all details in this form are true and correct.

I/We understand that any directions which I/we have given in this form will override any similar directions which I/we have previously given.

I/We authorise Generation Life Limited to process the instructions set out in this form.

I/We confirm that I/We have received a copy of the current Product Disclosure Statement (PDS) and have read and understood the PDS and agree to be bound by the terms and conditions set out in the PDS.

If your power of attorney has not previously been registered by us, we will require a certified copy of the power of attorney document as well as the appropriate proof of identification documents in accordance with the Anti-Money Laundering and Counter-Terrorism Financing Act 2006.

For more information, please refer to the 'Completing proof of identity' document on our website.

#### Signature of Investor 2

Name (please print)

Signature

Date (dd/mm/yyyy)

Please select the appropriate box

Individual

Trustee

Director/Company secretary

Power of attorney

#### Signature of Investor 1

Name (please print)

Signature

Date (dd/mm/yyyy)

Please select the appropriate box

Individual

Trustee

Director

Power of attorney

#### You can submit this form by:

**Mail:** PO Box 263, Collins Street West  
Melbourne VIC 8007



#### Postal address

GPO Box 263, Collins Street West  
Melbourne VIC 8007

#### Email

enquiry@genlife.com.au

#### Enquiries

Investor services: 1800 806 362  
Adviser services: 1800 333 657

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[genlife.com.au](http://genlife.com.au)