

Change of Name



How to fill in this form

Please complete this form if you have legally changed your name.

Complete section 1 - please attach a copy of the relevant birth, marriage or deed poll certificate that confirms your name.

Complete section 2.

Print, complete and sign this form. Return to us by: Email (scanned copies) to admin@asteronlife.co.nz,

Fax 0800 808 116 or +64 4 470 8992,

Post to Asteron Life, PO Box 894, Wellington 6140, Freepost 795

Section 1 Change of Name

Previous Name

Title First name(s) Last name

Policy Details

Policy number(s)

New Name

Title First name(s) Last name

Change Details

Please indicate the reason for your name change:

Marriage Deed Poll Reversion to Maiden Name Other (please specify)

Please attach a copy of the relevant birth, marriage or deed poll certificate that confirms your name.

Privacy Act 1993

For the purpose of the Privacy Act 1993, we confirm that we collect and use your personal information and may disclose your personal information to third parties for the purpose of administering your policy or in order to comply with legal requirements. Your details are stored securely with companies within the Suncorp Group and you can contact us at any time to request access to and correction of your personal information. The collection of this information is required under the terms of your policy.

For further information, please refer to the "Asteron Life Privacy Statement" which is specific to New Zealand law and the Suncorp Group's "Suncorp Privacy Policy". Both are available at www.asteronlife.co.nz, by phoning 0800 808 101, or by writing to Asteron Life Limited, PO Box 894, Wellington 6140.

Declaration

I have read and understood the Privacy Act section of this application and request that a change of name be noted.

Old signature

New signature

Date

Section 2 Preferred method of communication

My preferred method of communication:

Please tick one Email Phone Letter Fax

Contact details for communications