

5. Consent Acknowledgement

By signing below, I:

- consent to the deduction of the fee nominated in section 2 of this form.
- understand that I can withdraw my consent by providing written notice to Challenger, provided this is done before my application or maturity reinvestment is processed.

Investor

Full name

Signature (please sign)

Date / /

Where to send your completed form

Please mail the completed form to:

Challenger
Reply Paid 3698
Sydney NSW 2001

Alternatively, your adviser can send the form to us via ePost on AdviserOnline.

Superannuation fund details

Fund name: Challenger Retirement Fund
Phone: 13 33 55
Email: info@challenger.com.au
Website: challenger.com.au