MUFG

All Registry communications to:
MUFG Corporate Markets (AU) Limited
A division of MUFG Pension & Market Services
Locked Bag A14
Sydney South NSW 1235 Australia
Email: support@cm.mpms.mufg.com
Website: au.investorcentre.mpms.mufg.com

Company or Trust in which investment is held – THIS MUST BE COMPLETED

Full Name(s) of Registered Holding

Account Designation

Registered Address

Postcode

Securityholder Reference Number (SRN) Or Holder Identification Number (HIN)

A MINOR(S) STATEMENT AND INDEMNITY

PLEASE COMPLETE THIS FORM IN BLACK INK USING CAPITAL LETTERS. PHOTOCOPIES WILL NOT BE ACCEPTED.

Description of Securities (Shares, Options, etc)

Number of Securities held

I/We do solemnly and sincerely declare I am/we are the parent(s)/guardian(s) for the registered holder of the securities detailed above. The abovenamed securityholder is not yet of the legal age of consent as per certified copy of birth certificate provided herewith and cannot legally deal with matters pertaining to the holding. I/we hereby request that the securities be registered in my/our name(s) as detailed below.

Full name(s) of Parent(s)/Guardian(s)

Address to be recorded on the Register PO Box/RMB/Locked Bag/Care of (c/-)/Property name/Building name (if applicable)

Unit Number/Level

Street Number

Street Name

Suburb/Town

State

Post Code

In consideration of the security issuer registering the securities in my/our name(s) I/we hereby covenant to indemnify and forever keep indemnified the security issuer, the directors and the trustees of the security issuer, the security registrar and the directors and officers of the security registrar from and against all losses in respect thereof and all claims, actions, proceedings, demands, costs and expenses whatsoever which may be made or brought against them by reason of compliance with this request.

Contact Name

Telephone Number (Business Hours) ( )

Telephone Number (After Hours) ( )

B SIGNATURE(S) OF PARENT(S)/GUARDIAN(S) – THIS MUST BE COMPLETED

Sign Here – This section must be signed and witnessed for your instructions to be executed.
I/we authorise you to act in accordance with my/our instructions set out above.

Parent/Guardian 1

Parent/Guardian 2

Parent/Guardian 3

Witness

Witness

Witness

The witness(es) certifies that the person(s) who has/have signed this statement is/are known to them and has/have signed in the presence of the witness with their normal signature(s).

Date / /

NOTE: Australian The Corporations Act 2001 imposes severe penalties for making a false statement ($10,000 or 2 years imprisonment or both) or failing to ensure a statement is not false or misleading ($5,000 or 1 year imprisonment or both).

Overseas Please complete this statutory declaration in accordance with the laws of the country in which it is declared and ensure it is legally witnessed.

Personal Information Collection Notification Statement: MUFG Pension & Market Services ("MPMS") advises that your personal information is collected by MPMS organisations for the administration of your investment as required or permitted by the *Corporations Act 2001* (Cth) and other legislation. Some or all of your personal information may be disclosed to contracted third parties, or related MPMS companies in Australia and overseas. Your information may also be disclosed to Australian government agencies, law enforcement agencies and regulators, or as required under other Australian law, contract, and court or tribunal order. For further details about our personal information handling practices, including how you may access and correct your personal information and raise privacy concerns, visit our website at https://www.mpms.mufg.com for a copy of the MPMS privacy policy, or contact us by phone on +61 1300 554 474 to request a copy.