

# CHANGE OF MEMBER DETAILS

Member to complete Steps 1 to 4 (please use BLOCK letters).

## Step 1. Complete your personal details

Mr  Mrs  Ms  Miss  Other (please specify)

Surname/family name  Given names

Home/private address:

Number  Street Name

Suburb  City  Postcode

Work phone

Home phone

Mobile

E-mail\*

MoE number

Date of birth

School employed at

School number

\* I acknowledge that by providing my email address, I am consenting to receiving information about the Scheme (including the annual report) electronically. Should I not wish to receive such information electronically, or should my email address change, I undertake to advise Mercer (N.Z.) Limited, the Scheme's administration manager.

## Step 2. Details to be added or updated

**Please only add or update details that are new or need changing.**

### Change of name

#### Former name

Surname/family name  Given names

#### New name

Surname/family name  Given names

Please provide proof, e.g. marriage certificate. The document you provide must be certified as a true copy. For assistance with certification, refer to the *Confirmation of identity guide* in the *Documents & Forms* section on the Scheme website.

### Change of Postal Address and/or contact information

You can also update these on the Personal details page of [www.teachersretire.org.nz](http://www.teachersretire.org.nz)

**New Postal Address** (all correspondence concerning your Teachers' Scheme membership will be sent to this address)

Number  Street Name

Suburb  City  Postcode

Continued

## Step 2. Details to be added or updated (continued)

### Change of contact information

Work phone

Home phone

Mobile

E-mail\*

### Other change

Please provide details of any other change

  


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## Step 3. Sign the form

I confirm that the details I have provided on this form are correct and request that the Teachers' scheme records be altered accordingly. I understand that the personal information about me is collected and held to enable the operation of the Teachers' scheme, and that I can request access to it and to have it corrected. I authorise the Teachers' scheme Administrator to use this information for the purpose stated above and to disclose it to any other agency appointed by the ERP Trustees to assist with the ongoing administration of the Teachers' scheme.



Member's signature

Date

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## Step 4. Return instructions

Member to retain a copy of this form.



Member to send the original to Teachers' scheme Administrator, Mercer (N.Z.) Limited, PO Box 1849, Wellington 6140 or by email to [nztrsserp@mercero.com](mailto:nztrsserp@mercero.com).