

CHANGE OF NAME REQUEST FORM



Part of the
Suncorp Group

- 1** To change the name on your policy, please complete this form and email a copy to us with one of the following certificates or documents.
- a copy of the *Change of Name Certificate* issued by the state government department that handles this (e.g. the Registry of Births Deaths and Marriages), or
 - a copy of your drivers license or passport, or
 - a copy of your marriage certificate, or
 - a copy of your divorce *decree nisi*

2 I hereby request that my name be changed:

From:

To:

Your Former Signature

Your Present Signature

Date / /

Policy No. Date of Birth / /

Address

Suburb State Postcode

Email

Mobile

Home phone

3 Please return the completed and signed Change of Name Form with the appropriate documents to formalise your request to us via email or replied paid post:

Email: life_customerservice@asteronlife.com.au
Mail: Asteron Life Customer Service
Reply Paid 68
Sydney NSW 2001

We and any related companies that use the Asteron Life brand might let you know – including via mail, SMS, email, telephone or online – about news, special offers, products and services that you might be interested in. We will engage in marketing unless you tell us otherwise. You can contact us to update your marketing preferences at any time.