

CHANGE OF ADVISER FORM

Authority to change nominated financial adviser, provide financial information and documentation

Name of Product Provider	
--------------------------	--

Dear Sir/Madam, I hereby authorise and request that you authorise **Sarah Nulty** (as detailed below), authorised representative of Voyager Wealth Management as outlined in this signed information request authority, as my acting Financial Adviser and provide her with any information she may request and transfer all adviser remuneration rights.

Adviser details:

Adviser Name:	
Adviser Code:	

Client details:

Members Name:	
Membership Number:	
Date of Birth:	
Address:	

Signed - _____ Dated: ____ / ____ / ____