smart Monday | Group Insurance

Update contact details

Complete this form to make a change to your contact details in relation to your smartMonday Group Insurance account.

Please note that name changes must be received by post with relevant certified documents.

Section 1
Personal Details

Given Name *(Please provide your details as known by smartMonday Group Insurance prior to any change)*

Last Name

Member Number

Date of Birth

Section 2
New Contact Information

Please provide updated contact information.

Residential Address

City

State

Postcode

Phone Number

Email

Section 3
New Name

Certified copies of proof of name change must be sent to us by post.

Given Name *(Please provide your details as known by smartMonday Group Insurance prior to any change)*

Last Name

Section 4
Declaration & Signature

By completing this form, I declare that:

- All details I have provided on this form are true and correct.
- I authorise the Trustee to change the details of my smartMonday Group Insurance account as shown on this form.
- I have read and understood the smartMonday Privacy Statement (available at smartMonday.com.au) and understand how smartMonday Group Insurance will use my personal information.

Signature

Date

RETURN TO: smartmonday@iasas.com.au OR smartMonday Group Insurance PO Box 1305 South Melbourne VIC 3205 Queries: 1800 861 856

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