

Change of Name Form

Use this form if you have legally changed your name and need it updated on your policy.

How to fill in this form:

- Fill in all details and sign with both old and new signatures under Section 1.
- Fill in your contact details and preferred method of communications on Section 2.

Please attach a copy of the relevant document that confirms your change of name:

- Birth certificate
- Marriage certificate
- Certificate of divorce
- Name change by deed poll certificate

Complete, sign and return this form by: Email to contactus@aalife.co.nz

Post to Asteron Life, PO Box 894, Wellington 6140

Personal Information Disclosure

This form collects personal information which is necessary to provide the service you are requesting. If you do not provide all the requested information we may not be able to make the changes you would like. Personal information you provide about yourself or other individuals will be used and stored by Asteron Life Limited, Level 13, 55 Featherston Street, Wellington and other members of the Suncorp Group for the purpose of administering your insurance policy and related services. Under the Privacy Act individuals have certain rights of access to, and to request correction of, any personal information we hold about you. More detail about Asteron Life's privacy practices is contained in the Asteron Life Privacy Statement available at www.asteronlife.co.nz/privacy or on request.

Section 1 – Change of Name

Previous Name

Title Given name(s) Last name

Policy Details

Policy number(s)

New Name

Title Given name(s) Last name

Reason for Change

Please indicate the reason for your name change:

Marriage Deed Poll Reversion to Maiden name

Please attach a copy of the relevant birth, marriage or deed poll certificate that confirms your name.

Declaration

I declare that the information set out in this document is true and correct. I request that the policy is altered in accordance with my change of name.

Old signature New signature

Date / /

Section 2 – Preferred Method of Communication

My preferred method of communication: Email Phone Letter

Please tick one.

Contact details for communications

Asteron Life Limited

contactus@aalife.co.nz | 0800 874 444 | +64 4 495 8700

Contact Centre Hours: Mon – Fri, 8am-6pm

Level 13, Asteron Centre, 55 Featherston Street, Wellington

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