## **Change of Details**

Change of	Details			
Part 1: Existing D	Details			
☐ Mr ☐ Mrs ☐ Miss ☐ Ms	Given Name:	Surname:	Surname:	
Address:				
Suburb:		State:	Postcode:	
Phone: (H)	(W)	(I	(M)	
Email:				
Part 2: New Deta	nils			
What is your new Full Na	ame			
☐ Mr ☐ Mrs ☐ Miss ☐ Ms	Given Name:	Surname:		
This is the name that appears of i.e. marriage certificate/change	on all official documents or legal paper e of name certificate etc.	s. Please attach copies of evidence	of name change.	
What is your new Addre	ess? (Your mail will be sent to this add	ress)		
Address:				
Suburb:		State:	Postcode:	
Phone: (H)	(W)	(J	(M)	
Email:				
Proof of Identity				
Holders must provide two (2) a passport, birth certificate/c licence) credit card, EFTPOS c	) original identification documents, o itizenship certificate, licence issued u card or Medicare card. the Holder's name with one (1) also in	ınder Australian law (drivers licer	•	
<b>Privacy Declarat</b>	ion			
Information collected on this form is held in accordance with <i>Privacy and Personal Information Protection Act 1998</i> . Personal information is collected for a lawful purpose that directly relates to our primary function of providing cemetery/cremation services				

**Site Location:** 

in accordance with the *Cemeteries and Crematoria Act 2013*. We will not collect any more information than is necessary to fulfill these functions. Except as necessary to carry out these functions, we will not disclose your personal information to anyone without your consent unless legally required to do so. We will take all reasonable steps to protect the security of any personal information held, be it stored in electronic or hard copy format. You may request access to your personal information held by us, except in the circumstances set out in Part 2, Division 3 of the *Privacy an Personal Protection Act 1998*.

Initials