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The Star Entertainment Group Limited ABN 85 149 629 023 All Registry communications to:

| ENTERTAINMENT GROUP LTD                                                |             |               | MUFG Corporate Markets (AU) Limited                                            |
|------------------------------------------------------------------------|-------------|---------------|--------------------------------------------------------------------------------|
| Full Name(s) of Registered Holding                                     |             |               | A division of MUFG Pension & Market Services                                   |
|                                                                        |             |               | Locked Bag A14                                                                 |
|                                                                        |             |               | Sydney South NSW 1235 Australia                                                |
|                                                                        |             |               | Telephone: +61 1300 880 923<br>Facsimile: +61 2 9287 0303                      |
| Account Decignotion                                                    |             |               | ASX Code: SGR                                                                  |
| Account Designation                                                    |             |               | Email: starentertainment@cm.mpms.mufg.com                                      |
|                                                                        |             |               | Website: au.investorcentre.mpms.mufg.com                                       |
| Registered Address                                                     |             |               |                                                                                |
|                                                                        |             |               | Securityholder Reference Number (SRN)<br>Or Holder Identification Number (HIN) |
|                                                                        |             |               |                                                                                |
|                                                                        | Postcode    |               |                                                                                |
|                                                                        |             |               |                                                                                |
| A REQUES                                                               | T FOR DIREC | T CREDIT OF F | PAYMENTS                                                                       |
|                                                                        |             |               |                                                                                |
| Please use a BLACK pen. Print CAPITAL letters inside the shaded areas. | ABC         | 123           |                                                                                |

Insert details of your Australian Financial Institution, Branch and Account into which you wish to have your payments made. This request will not cancel any reinvestment plan participation (if any) unless we receive specific instructions from you. A detailed payment advice will be provided for each payment.

A direct credit request form is required for each holding.

Name(s) in which your account is held

| BSB Number (must be 6 digits) | Account Number |  |  |  |  |  |
|-------------------------------|----------------|--|--|--|--|--|
| Name of Financial Institution |                |  |  |  |  |  |
|                               |                |  |  |  |  |  |
| Branch Suburb/Town            |                |  |  |  |  |  |
|                               |                |  |  |  |  |  |

## B SIGNATURE(S) OF SECURITYHOLDER(S) – THIS MUST BE COMPLETED

Securityholder 1 (Individual)

| Joint Securityholder | 2 ( | (Individual) |
|----------------------|-----|--------------|
|----------------------|-----|--------------|

| Joint Securityholder 3 (Individual) |
|-------------------------------------|
|                                     |
|                                     |
|                                     |

Sole Director and Sole Company Secretary/Director (delete one) Director/Company Secretary (delete one)

Date / /

Signing Instructions: This form should be signed by the Unitholder. If a joint holding, all Unitholders should sign. If signed by the Unitholder's attorney, the power of attorney must have been previously noted by the registry or a certified copy attached to this form. If executed by a company, the form must be executed in accordance with the company's constitution and the *Corporations Act 2001* (Cth) (or for New Zealand companies, the *Companies Act 1993*).

Personal Information Collection Notification Statement: MUFG Pension & Market Services ("MPMS") advises that your personal information is collected by MPMS organisations for the administration of your investment as required or permitted by the *Corporations Act 2001* (Cth) and other legislation. Some or all of your personal information may be disclosed to contracted third parties, or related MPMS companies in Australia and overseas. Your information may also be disclosed to Australian government agencies, law enforcement agencies and regulators, or as required under other Australian law, contract, and court or tribunal order. For further details about our personal information handling practices, including how you may access and correct your personal information and raise privacy concerns, visit our website at <u>www.mpms.mufg.com</u> for a copy of the MPMS privacy policy, or contact us by phone on +61 1300 554 474 to request a copy.

## SGR DIV001