



ENDOWMENT POLICY - NOMINATION CHANGE OF BENEFICIARY

IMPORTANT INFORMATION

Complete all relevant sections of this form and submit it to lifecycle@thecycle.co.za.

Only the policyholder is able to nominate his / her beneficiaries. If this form is signed by anyone else other than the policyholder, these nominations will not be valid. This nomination will replace all previous nominations on record.

CUT OFF TIMES

We will only process your instruction once we receive all the required documents. Instructions received before 13:00 (SA time) on a business day will be processed on the same day. Any instruction received after 13:00 on a business day will be processed on the next business day.

CONTACT US

If you need help with this form, contact us on 071 628 9722 or email lifecycle@thecycle.co.za between 08:00 - 17:00.

PROVIDE YOUR PERSONAL DETAILS

Policy Number	<input type="text"/>
Full Name	<input type="text"/>
ID or Passport Number (if Foreign National)	<input type="text"/>
Nationality (if Foreign National)	<input type="text"/>
Name of Financial Advisor (if applicable)	<input type="text"/>

INDICATE YOUR BENEFICIARY NOMINATIONS

Either a beneficiary for proceeds **OR** a beneficiary for ownership may be nominated. If no beneficiary for proceeds is nominated, Policy benefits will be paid to your estate.

The signature of the investor's spouse is required if the investor is married in community of property and nominates a beneficiary other than the investor's spouse.

Marital Contract: Community of Property Ante-nuptial Contract

I hereby agree to the nominations below:

Full Name of Spouse Signature of Spouse

Beneficiary for Proceeds

	Beneficiary 1	Beneficiary 2
Surname		
First Name(s)		
ID Number		
Relationship		
Share %		
Contact Number		
Email Address		

	Beneficiary 3	Beneficiary 4
Surname		
First Name(s)		
ID Number		
Relationship		
Share %		
Contact Number		
Email Address		

	Beneficiary 5	Beneficiary 6
Surname		
First Name(s)		
ID Number		
Relationship		
Share %		
Contact Number		
Email Address		

Beneficiary for Ownership

Only one beneficiary for ownership must be nominated.

Beneficiary	
Surname	
First Name(s)	
ID Number	
Relationship	
Contact Number	
Email Address	

AUTHORISATION AND DECLARATION

- I confirm that all information provided on this form is correct.
- I have not received advice from the Administrator regarding this instruction.
- I confirm that my appointed financial advisor may have access to my investment details via the secure section of the Administrator's website or via a secure electronic channel at my financial advisor's request.
- I have read, understood and agree to the latest Terms and Conditions which I understand may have changed since my original investment.

Investor	
Signature	
Full Name	
Signed at	
Date	