



Nominations Form

Please use this form to nominate up to four nominees to whom any sums of money may be paid in the event of your death.

1 Nominator - Pursuant To Schedule 9 Of The Friendly Societies Act 1992

First Name(s)

Surname

Address

Postcode

Date of birth / /

URN

Being a member of Wiltshire Friendly Society Limited ("the Society"), hereby nominate:

2 Nominee(s)

Name	Address	Date of birth	Relationship (if any)	Proportion of lump sum %
		/ /		
		/ /		
		/ /		
		/ /		
				Total 100%

3 Declaration

As the person(s) to whom any sum(s) of money payable by the Society at my death (the overall total of which shall not exceed the limit specified under law from time to time) shall be paid to the nominees stated. Save as otherwise provided by statute or regulation, this nomination shall remain in force until revoked by me in writing and confirmed by the Society. This form shall have the effect of revoking any previous nomination made.

Signed (Member)

Date / /

in the presence of:

Signed (Witness)

Date / /

(The witness must be over the age of 18 and may not be your spouse and the nominee or his or her spouse)

Full name of witness present

Address

Postcode

IMPORTANT NOTES:- nominations are automatically revoked on the occasion of the marriage or re-marriage of the nominator. In such event members should notify the Society immediately and if required complete a further nomination. This nomination shall have no effect unless properly delivered to the Society.

Office Use Only

Customer Validated	Yes <input type="checkbox"/> No <input type="checkbox"/>	URN <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Keyed by	Date / /	Checked by Date / /