

NOMINATION FOR FUNERAL UNDER-TAKER AT THE EVENT OF DEATH OF PARTICIPANT

(Please return this form immediately)

Date of signing

Participant's Name

Membership No. Contact Number

Nominee's (PLEASE PRINT)

NAME & SURNAME	RELATIONSHIP	ID NUMBER

Participant to indicate whether the money is to be used for: (PLEASE TICK)

Funeral Expenses ☐

or

Cleansing Ceremony ☐

Signature

IF THE NOMINEE HAS DIED, PLEASE NOMINATE SOMEONE ELSE IMMEDIATELY
NOMINEE'S (PLEASE PRINT)

NAME & SURNAME	RELATIONSHIP	ID NUMBER

On this scheme the participant should nominate a person above the age of 18 years.

NEXT OF KIN

Name & Surname Relationship

ID Number: Contact Number: (+268)

Physical Address:

Witness