



Form of Nomination (Multiple)

THIS FORM BECOMES VALID ONLY FOLLOWING ADMISSION TO MEMBERSHIP

Form of Nomination for Multiple Nominees

I, [print name] _____ Membership Number: _____

Address: _____

a member of Link Credit Union Ltd, **hereby revoke all previous nominations and nominate the following person(s)**

NAME	ADDRESS	RELATIONSHIP

to become entitled to such property in the credit union (whether in savings or insurances with the exception of the Death Benefit Rider, if applicable, or otherwise), not exceeding the limit of the amount for the time being authorised by law which I may have at the time of my death. The proceeds, if applicable, of the Death Benefit Rider may be applied by the credit union towards my vouched funeral/bereavement expenses and if not so applied shall be paid to the person(s) referred to above.

Notes:

This form becomes valid **only** following admission to membership of the nominator. This form should be adapted if specific property only is to be nominated.

- A nomination cannot be revoked or varied by the Will of the member, under section 21(4) of the Credit Union Act 1997 (as amended) (hereinafter "the Act").



Link Credit Union Ltd

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Website: www.linkcu.ie

- The marriage of the member will revoke an existing nomination, under section 21(6) of the Act.
- A nomination shall be revoked by the death of the nominee(s) before the death of the nominator, under section 21(7) of the Act.
- The form of nomination must be delivered to the registered office during the nominator's lifetime, under section 21(1) of the Act
- If you wish to nominate more than one nominee, the funds will be divided equally between each nominee
- If the nominee(s) is aged under 16 years of age, the credit union may pay the sum to the parent or guardian of the nominee or to any other person of full age:
 - To hold it in trust for the nominee or apply it for their benefit; and
 - Whom the credit union may think a fit and proper person for the purpose
 - Please provide details of the proposed appropriate adult:

Name: _____

Relationship to Nominee: _____

Address: _____

Phone No: _____

- And a receipt for that sum signed by that parent, guardian or other person shall be a sufficient discharge to the credit union for all money so paid.

Note for a nomination to be valid, the nominee must be a name person, and not an organisation or charity.

Member Signature: _____ Date: _____

Witness Signature: _____ Date: _____

Print Name: _____ *[The witness shall not be the nominee]*

Address: _____

Occupation: _____