



## CHANGE OF BENEFICIARY

**This form supersedes any nomination forms that I have previously completed.**

I (full name) \_\_\_\_\_

of (address) \_\_\_\_\_

\_\_\_\_\_

as a member of Discovery Credit Union Ltd, I hereby change my nominated beneficiary to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Tel: \_\_\_\_\_

e-mail: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

as the person to whom there shall be transferred all monies in my Credit Union account as may be mine at the time of my decease, whether in shares or otherwise.

\_\_\_\_\_

(Signature of member)

\_\_\_\_\_

(Date)