SOUTH DUBLIN CREDIT UNION

FORM of NOMINATION

(TO BE COMPLETED ONLY FOLLOWING ADMISSION TO MEMBERSHIP)

Member Account Number_____

I, (Print Your Name Here)_____

Of (Print Your Address Here)_____

_____

being a member of South Dublin Credit Union Limited, hereby revoke all previous nominations and nominate the following person or persons

Name	Address/Telephone Number	Relationship	% of Credit Union Property

to become entitled to such property in the credit union (whether in savings, deposits, insurances 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.

Please Note: Under section 21(4) of the Credit Union Act 1997, a nomination shall not be revocable or variable by the will of the nominator or by any codicil to his/her will.

Under section 21(6) of the Credit Union Act 1997, the marriage of a credit union member shall operate as a revocation of any nomination made by him/her before his/her marriage.

Date_____

Signature of Member_____

* Witness 1_____ Witness 1 _____

* Witness 2 _____ Witness 2 _____

Both Signatures 1 & 2 (must be South Dublin Credit Union Officers) Please Print Name

Address Witness 1 _____

Occupation Witness 1 _____

Address Witness 2 _____

Occupation Witness 2 _____

***Please Note – The witnesses shall not be a nominee.**