



THE SINGAPORE TEACHERS' CO-OPERATIVE SOCIETY LIMITED
150 CHANGI ROAD #02-06 GUTHRIE BUILDING
SINGAPORE 419973 TEL: 64404393/64405393 FAX NO: 64403382

DECLARATION OF NOMINEE

NAME OF MEMBER : _____

NRIC NO : _____ DATE OF BIRTH : _____

HOME ADDRESS : _____

SINGAPORE () CONTACT NO : _____

PARTICULARS OF NOMINEE

NOMINEE	DATE OF BIRTH	NRIC/BC NO.	RELATIONSHIP
NAME:			
HOME ADDRESS:			
SINGAPORE ()		TEL NO:	

PARTICULAR OF GUARDIAN WHOSE NOMINEE IS MINOR (AGE BELOW 21 YEARS OLD)

GUARDIAN	DATE OF BIRTH	NRIC/BC NO.	RELATIONSHIP TO NOMINEE
NAME:			
HOME ADDRESS:			
SINGAPORE ()		TEL NO:	

Date of Nomination

Signature of Member

SIGNATURE OF 2 WITNESSES TO NOMINATION

	NAME	NRIC NO.	SIGNATURE
1.			
2.			

FORMS WITH ERASURES, CORRECTION FLUID OR CANCELLATION WILL NOT BE ACCEPTED.

1. Complete Nomination Form should be submitted to the Society's Secretary for registration.
2. This declaration is made under the provisions of the Societies By-Law 4.9.
3. Sums due to member will be paid to Nominee on death of member.
4. Guardianship of Nominee will cease when minor Nominee attains the age of 21 years.
5. Applicant should not be guardian.
6. Applicant and Nominees should not sign as witness.
7. This Form supersedes the previous Nominee Form.

FOR OFFICE USE

Membership No.	Date Approved:	Remarks:
Date Nominee(s) Registered:	Senior Manager:	