

# Nomination of beneficiary(ies) for policies held under an Individual Discretionary Trust

**To** The trustees of the trust known as

	Trust
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Dated 

/		/
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Settlor(s)

Policy number(s)

I/we would like you (the trustees) to consider paying any benefit payable under the above trust to the following person(s). If any person is a child, then any death benefit should be used for their upkeep, welfare and education.

I/we understand that the payment of any benefit to the beneficiaries is at your complete discretion and that you do not have to pay the person(s) listed below, but I/we would like you to keep my/our wishes in mind when making your decision.

This request replaces any previous requests made by me/us under this policy(ies).

This request is confidential and during my/our lifetime it should not be made known to the person(s) listed below without my/our agreement.

full name		
address		
	Postcode	Postcode
Relationship		
Date of birth	/ /	/ /
full name		
address		
	Postcode	Postcode
Relationship		
Date of birth	/ /	/ /

Please add any additional information that you would like us (the trustees) to consider


The information you have provided in this form will be used in accordance with our Data Protection Notice. A copy of this notice can be found on our website, [www.canadalife.co.uk](http://www.canadalife.co.uk), or is available upon request by calling 0345 6060708.

Settlor's signature

If joint, second settlor's signature



Date

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 /  / 

If your circumstances change and you want to change your nomination, please inform the trustees.



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