BENEFIT WAIVER
(FOR PERSONS OVER 18 YEARS ONLY)

Please send your completed form to:

Email: info@sentinel.za.com

Hand in: at your nearest Client Service Centres situated in Sandton, Welkom, Klerksdorp, Carletonville and Witbank/Emalahleni.

Industry / Participant Number	Identity / Passport Number

BENEFIT WAIVER BY APPLICANT

Title	Initials	Surname

Full Names (First Two Names in Full)			
1		2	

Identity | Passport Number		Gender	M	F
Date of Birth				

POSTAL ADDRESS

PO Box Number	Suburb, City or Town	Postal Code

RESIDENTIAL ADDRESS

House / Complex Number	Street Name	
Suburb	City	Postal Code

CONTACT DETAILS

Tel Number		Mobile Number	
Work Tel No			
Email			

Please indicate the preferred method of communication	SMS		Email		Telephonic		Postal	

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CONTINUED

Industry / Participant Number of Deceased	Identity Number of Deceased

I hereby declare:

1. I am aware that in terms of the Pension Funds Act 24 of 1956 (the Act), I am regarded as a beneficiary in respect of the lump sum death benefit payable by the Sentinel Retirement Fund (the Fund) as a result of the death of the above member of the fund.
2. I hereby waive and repudiate any claim which I may have in respect of such benefit.
3. I exercise this waiver voluntarily and in good faith while of sound and sober mind and without having been subjected to duress in any form.
4. This is not intended to be a cession, transfer or reduction of pension rights as envisaged in the Act.
5. I am aware of the following:

   5.1 Any benefit so waived will be apportioned or re-allocated at the sole discretion of the Trustees of the Fund in accordance with the Act.

   5.2 Only persons who are beneficiaries in terms of the Act can be taken into account for such apportionment or reallocation. 5.3 The decision of the Trustees is final in terms of the Rules of the Fund/s.

(Kindly attach a copy of your Identity Document / Passport)

Signature	Date
Electronic signatures are not permitted to be used on this Application Form.	Y Y Y Y M M D D

Sandton: 5th Floor, 92 Rivonia Road, Wierda Valley, Sandton, 2196 | **Toll-Free** 0800 776 861
Carletonville: S Buys Office Park, Shop 10, Corner Kaolin and Radium Streets, Tel (011) 481 8290/1
Klerksdorp: 54 Buffelsdoorn Road, Flamwood, Tel (011) 481 8024/8 | **Welkom:** Shop 25, The Strip, 314 Stateway, Tel (011) 481 8025/6
Emalahleni / Witbank: WCMAS Building, Corner OR Tambo and Susanna Streets, Tel (011) 481 8295/6