CHANGE OF ADDRESS

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 (Member / Pensioner)	Identity Number (Member / Pensioner)

PERSONAL DETAILS

Title	Initials	Surname

Full Names (First Two Names in Full)			
1		2	

Identity Number | Passport Number	
Tax Number	

Gender	M	F	Birth Date	

POSTAL ADDRESS

PO Box Number	Suburb, City or Town	Postal Code

RESIDENTIAL ADDRESS

House/Complex No	Complex Name
Street Address	

Suburb		Postal Code

CHANGE OF ADDRESS

- CONTINUED

Industry / Participant Number (Member / Pensioner)	Identity Number (Member / Pensioner)

CONTACT DETAILS

Telephone Number	Code		Number	
Mobile Number	Code		Number	
E-mail				

Please indicate the preferred method of communication	SMS		Email		Telephonic		Postal	

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