

PROFILE DETAIL UPDATE

PERSDET01



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

PROFILE DETAIL UPDATE

- CONTINUED



Industry / Participant Number (Member / Pensioner)

Identity Number (Member /Pensioner)

PERSONAL DETAILS (CONTINUED)

CONTACT DETAILS

Telephone Number	Code		Number						
Mobile Number	Code		Number						
E-mail									
Please indicate the preferred method of communication		SMS	☐	Email	☐	Telephonic	☐	Postal	☐

MARITAL STATUS

Have you been divorced before?	☐ Y	☐ N							
Are you aware of a divorce order in respect of an allocation of a portion of your Sentinel pension interest to your ex-spouse?	☐ Y	☐ N							
If yes, has this amount been paid to your ex-spouse?	☐ Y	☐ N							
Married	☐	Divorced Single	☐	Married but separated	☐	Widowed	☐	Cohabiting Partner	☐

DETAILS OF SPOUSE IF APPLICABLE

Title	Initials	Surname
Full Names (First Two Names in Full)		
1		2
Identity Number Passport Number		
Gender	☐ M ☐ F	Birth Date

PROFILE DETAIL UPDATE

CONTINUED



Industry / Participant Number (Member / Pensioner)

Identity Number (Member / Pensioner)

DETAILS OF CHILDREN

Please list the following details of all the legal and/or adopted children of the member (Both under and over the age of 18 years)

Initials	Surname (Child 1)	Date Of Birth
Initials	Surname (Child 2)	Date Of Birth
Initials	Surname (Child 3)	Date Of Birth
Initials	Surname (Child 4)	Date Of Birth
Initials	Surname (Child 5)	Date Of Birth

Signature

Date

Electronic signatures are not permitted to be used on this Application Form.

Y	Y	Y	Y	M	M	D	D
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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