

Section 2**NOMINATED STUDENT(S)**

I, the Bond Owner, hereby nominate the following student(s).

Nominated student 1

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

Son

Daughter

Grandson

Granddaughter

Nephew

Niece

Other (please specify)

Nominated student 2

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

Son

Daughter

Grandson

Granddaughter

Nephew

Niece

Other (please specify)

Nominated student 3

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

Son

Daughter

Grandson

Granddaughter

Nephew

Niece

Other (please specify)

Nominated student 4

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

Son

Daughter

Grandson

Granddaughter

Nephew

Niece

Other (please specify)

Nominated student 5

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

Son

Daughter

Grandson

Granddaughter

Nephew

Niece

Other (please specify)

Nominated student 6

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

Son

Daughter

Grandson

Granddaughter

Nephew

Niece

Other (please specify)

Nominated student 7

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

Son

Daughter

Grandson

Granddaughter

Nephew

Niece

Other (please specify)

Nominated student 8

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

Son

Daughter

Grandson

Granddaughter

Nephew

Niece

Other (please specify)

Nominated student 9

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

Son

Daughter

Grandson

Granddaughter

Nephew

Niece

Other (please specify)

Nominated student 10

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

Son

Daughter

Grandson

Granddaughter

Nephew

Niece

Other (please specify)

Section 3 SIGNATURE(S) OF INVESTOR(S)/POLICYHOLDER(S)

This must be completed.

NOTE:

- If being signed under Power of Attorney, the attorney signature(s) must be in accordance with the Power of Attorney.
- Original signature(s) on forms are required. For security reasons faxes cannot be accepted.

Bond owner 1

Date (DD/MM/YYYY)

Name of bond owner

Director

Trustee

Company
Secretary

Other

Bond owner 2

Date (DD/MM/YYYY)

Name of bond owner

Director

Trustee

Company
Secretary

Other

PRIVACY

All information collected by Centuria Life Limited is collected and handled in accordance with Centuria's Privacy Policy, a copy of which is available on our website (centuria.com.au) or a copy can be obtained by calling **1300 50 50 50**.

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