

Solidarity Retirement Plan

This form should be completed in full by the applicant

Client number											
Reference number											

APPLICANT DETAILS											
Title		Surname									
Initials		Full names									
Gender		ID no									
Postal address											
		Postal code									
Residential address											
		Postal code									
E-mail address							Language Preference	Afrikaans	English		
Tel no (home)					Tel no (work)						
Cell no					Fax no						

SOLIDARITY RETIREMENT PLAN DETAILS					
Please select the relevant contribution option (mark with X):					
A	Lump sum contribution (single premium)	Amount to be invested once-off (minimum of R2,000)	R		
B	Monthly contribution	Amount to be paid monthly (minimum of R150)	R		
Do you want your premium to be escalated annually on 1 March?			Yes	No	
If yes, please indicate the percentage premium escalation you prefer annually on 1 March			5%	7%	10%

Solidarity Retirement Plan Fees	
• Implementation fee:	R150 (once-off)
• Administration fee:	R15 (per month)
• Asset Management fee:	Capital Growth portfolio – 1,55% per annum Capital Preservation portfolio – 0,80% per annum

Investment Details
Your Solidarity Retirement Annuity will be invested in the Life Stage Investment Model. The life stage model distinguishes between a capital growth and a capital preservation portfolio. A member will be invested in the capital growth portfolio up to the age of 50, thereafter the member's investment will be moved to the capital preservation portfolio. The younger a member is, the more risk can be tolerated, and the older a member is, the less risk can be tolerated and the focus with the investment moves to capital protection and therefore beating inflation.

NOMINATION OF BENEFICIARIES (*Total Benefit must be equal to 100%)																	
#	Initials & Surname	Identity number												Relationship	Benefit		
1																	%
2																	%
3																	%
															Total Benefit*	%	

BANK DETAILS FOR PAYMENT OF DEBIT ORDERS																	
Name of institution											Branch						
Name of account holder											Branch code						
Type of account	Current	Savings	Transmission	Date of debit order				1 st of the month			16 th of the month						
Account number																	

TERMS AND CONDITIONS

I hereby understand, accept and confirm that:

1. All statements and details supplied on this form are true and correct.
2. This application form, the membership certificate, benefit statements, and other documents are the basis of the contract.
3. The Solidarity Retirement Plan will place the investment after acceptance of the application within five working days, at the price then applicable and will be kept for the exclusive benefit of the investor.
4. Solidarity Retirement Plan subtracts the initial implementation and administration fees from the investment before investing in the underlying assets. All costs will be confirmed in the membership certificate.
5. Solidarity Retirement Plan will pay the ongoing administration fee on a regular basis from the income and/or capital of the investment.
6. Solidarity Retirement Plan reserves the right to change the flat ongoing administration fee, on prior notice to me.
7. Solidarity Retirement Plan is authorized to repurchase units or realize investments for the purpose of paying any withdrawal and/or regular income, as well as for payment of statutory charges.
8. Compliance with the rules of the Solidarity Retirement Plan is always a qualifying condition for continued administration of my contract. Solidarity Retirement Plan reserves the right to change these rules from time to time, on prior notice to me.
9. Where appropriate, this application is subject to the rules and requirements of the trustees of the Retirement Plan, as well as the statutory requirements of the applicable product.

SIGNATURE OF APPLICANT															
Signature of the applicant							Date	Y	Y	Y	Y	M	M	D	D