

APPLICATION FOR MEMBERSHIP

1. IMPORTANT INFORMATION

Please complete this form if you wish to become a member of the Destiny Preservation Provident and/or Destiny Preservation Pension Fund. GIB Financial Services (Pty) Ltd, an approved Fund administrator and authorised financial services provider, is the Administrator

- 1. Please complete all relevant sections of this application in order to process this investment.
- 2. Please email the required documents in the checklist below to destiny@gib.co.za.
- 3. The administrator will only finalise the processing of your application when all required documents are received and once the money reflects in Destiny's bank account.

Document checklist

Completed Preservation Fund application (pages 1-3)

Signed Destiny Preservation Fund Investment Overview

Copy of your South African bar-coded ID or valid passport (if foreign national)

The applicant is to be a member of the:

Destiny Preservation Provident Fund and/or Destiny Preservation Pension Fund

2. **DETAILS OF INVESTOR / MEMBER** Title Surname First Name(s) d d / m m / c Date of Birth Country of Birth ID number (Passport number if foreign national) Income tax number Residential address Postal code Postal address If the same as above, please tick this box. Postal code Business address Postal code Telephone (W) Telephone (H) Cell Fax

Email

Marital Status: Single	Married Gender: Male Fe	male Language:	English Afikaans												
Income per annum R															
Source of funds invested															
3. BANK DETAILS															
- DAING DETAILS															
Name of accountholder		Name of bank													
Type of account		Account Number													
Branch name		Branch Code													
4. PORTFOLIO SELEC	CTION														
See Fact Sheets at www.des															
Destiny LifeStage Model	Y N														
	% Allocation (if no above)														
Market Enhanced Portfolio															
Moderate Portfolio															
Conservative Portfolio															
Defensive Portfolio															
Money Market Portfolio															
Satrix Enhanced Balanced Tr	acker Fund														
5. THE FUND'S DETA	II e														
5. THE FUND'S DETA															
	Destiny Preservation Provident Fund	Destiny Preservation P	ension Fund												
FSB Registration Number SARS Number	12/8/37588/1 18/20/4/41971	12/8/37611/1 18/20/4/41965													
Bank Account Name	Destiny Preservation Provident Fund Nedbank	Destiny Preservation Per	nsion Fund												
Bank Branch	Business Northrand (146905)	Nedbank Business Northrand (146	905)												
Account Number	1469161702	1469161680													
6. DEPENDANTS / BE	:NEFICIARIES														
	ants & beneficiaries will be subject to section		t.												
The following person is a	Dependant or a Nominated	Beneficiary													
Surname															
Name(s)															
Date of birth	m / c c y y Rand amount spent on d	ependant per month R													
Address															
		Postal Co	ode												
Email		Benefit	%												
Telephone															

0 1	erson is	s a	l		D	eper	nda	nt c	or a		1	Vor	nin	ate	d		Ber	nef	ficia	ry												
Surname																																
Name(s)																		I														
Date of birth	d d	/	m	m	/	С	У	У	R	an	d aı	mo	unt	sp	en	t on d	epend	da	nt p	er	mo	ontl	h	R [
Address																																
																							F	ost	al	Со	de					
Email																							Е	Bene	fit						%	
Telephone													R	ela	tior	nship																
The following pe	erson is	s a	[D	eper	nda	nt c	or a		١	Vor	nin	ate	d		Ben	nef	ficia	ry												
Surname																																
Name(s)																																
Date of birth	d d		m	m	/	С	У	У	R	an	d aı	mo	unt	sp	en	t on d	epend	da	nt p	er	mo	ontl	h	R [
Address																																
																							F	ost	al	Со	de					
Email																							Е	Bene	fit						%	
Telephone													R	ela	atio	nship																
The following pe	erson is	s a			D	eper	nda	nt c	or a		1	Vor	nin	ate	d		Ben	nef	ficia	ry												
Surname						Ť										$\overline{}$		T		Ī												
Name(s)				П	Ť	Ť	T											Ť		Ť	Ì	Ī			j							
Date of birth	d d	1	m	m	/	С	У	у	R	and	d aı	mo	unt	sp	en	t on d	epend	da	nt p	er	mo	ontl	h	R	i				T	П	j	
Address				П	Ť	Ť	İ							İ			ĖТ	T	Ť	T				T	T		Т	T	T	П		\exists
				П	\forall	Ť	T		П		T							Ť	\top	T	1		F	ost	al (Co	u de		T	П		\equiv
E		T		П	\dagger	\dagger	T										П	Ť	$\overline{}$	T	T			Bene							%	
Email				=	=	=	-		$\overline{\Box}$	〒	$\overline{}$	$\overline{}$	_		c	nship		Ť	İ	Ī									İ	П		
Telephone													R	ela	tior																	
Telephone	erson is	s a			D	eper	nda	nt c	or a			ـــا Nor	nin:				Ber	nef	ficia	rv												
Telephone The following pe	erson is	s a			D	eper	nda	nt c	or a		1	Nor					Ber	nef	ficia	ry												
Telephone The following personness Surname	erson is	s a			D	eper	nda	nt c	or a		N	Vor					Ber	nef	ficia	ry												
Telephone The following pe	erson is	s a	m	m		eper	nda 	nt c		and			min	ate	d	t on d					mo	ont	h	R								
Telephone The following per Surname Name(s)		s a	m							and			min	ate	d						mo	ont	h	R								
Telephone The following per Surname Name(s) Date of birth		3 a	m	m						and			min	ate	d						mo	onti		R Post	al	Co	de					
Telephone The following per Surname Name(s) Date of birth		3 a a	m	m						ano			min	ate	d						mo	onti	F				de				%	
Telephone The following per Surname Name(s) Date of birth Address Email		/ /	m	m						and			unt	sp	ent	t on d					mo	onti	F	Post			de				%	
Telephone The following per Surname Name(s) Date of birth Address Email Telephone	d d				<i>j</i>	C C				ano			unt	sp	ent						mo	onti	F	Post			de				%	
Telephone The following per Surname Name(s) Date of birth Address Email	d d				<i>j</i>	C C				and			unt	sp	ent	t on d					mo	ontl	F	Post			de				%	
Telephone The following per Surname Name(s) Date of birth Address Email Telephone 7. INVES	d d d	/ / / / / / / / / / / / / / / / / / /	is r	RA ny d	/ / []	N to a	y	y ain	R I	yse	dd ai	mo	mina unt	sp ela	ent	t on d	epend	da I	nt p	per	ate	ed v	F	Post	efit			tior	ns a	and		
Telephone The following per Surname Name(s) Date of birth Address Email Telephone 7. INVES	TOR D	/ / / / / / / / / / / / / / / / / / /	is r	RA ny d	/ [] TIO	N to a	y	ain	t m	yse	dd ar	mo	min: unt the	sp ela	ent	t on d	epend t risk:	da T	nt p	per	ate	d ved vent	F	Posta Bene	efit	nstı	uc				I aı	m a
Telephone The following per Surname Name(s) Date of birth Address Email Telephone 7. INVES I acknowled and accept the second accept the second accept.	TOR D	/ / / / / / / / / / / / / / / / / / /	is r	RA ny dany he I tital	/ [] TIO	N to a que (Ong	cqu cha	ain rac Ove	t m	yse stic	blf was ir	mo with	unt Rolling the blve nde	sp ela	ent vith	t on d	epende trisk trisk electeconte	da 	associatives the	per	ate	ed vent	F E with	Post of the major	/ ir	nsti	uc				I aı	m a
Telephone The following per Surname Name(s) Date of birth Address Email Telephone 7. INVES I acknowled and accept I have read	TOR D	/ / / / / / / / / / / / / / / / / / /	is r	RA ny dany he I tital	/ [] TIO	N to a que (Ong	cqu cha	ain rac Ove	t m	yse stic	blf was ir	mo with	unt Rolling the blve nde	sp ela	ent vith	t on d	epende trisk trisk electeconte	da 	associatives the	per	ate	ed vent	F E with	Post of the major	/ ir	nsti	uc				I aı	m a
Telephone The following per Surname Name(s) Date of birth Address Email Telephone 7. INVES I acknowled and accept the accept the selections.	TOR D	/ / / / / / / / / / / / / / / / / / /	is r	RA ny dany he I tital	/ [] TIO	N to a que (Ong	cqu cha	ain rac Ove	t m	yse stic	blf was ir	mo with	unt Rolling the blve nde	sp ela	ent vith	t on d	epende trisk trisk electeconte	da 	association investment as	perioci	ate	ed vent	F E with	Post Sense	rit co	nstr onfi	uc	tha	at I	und	I ai	m a
Telephone The following per Surname Name(s) Date of birth Address Email Telephone 7. INVES I acknowled and accept the second accept the second accept.	TOR D	/ / / / / / / / / / / / / / / / / / /	is r	RA ny dany he I tital	/ [] TIO	N to a que (Ong	cqu cha	ain rac Ove	t m	yse stic	blf was ir	mo with	unt Rolling the blve nde	sp ela	ent vith	t on d	epende trisk trisk electeconte	da 	associatives the	perioci	ate	ed vent	F E with	Post Sense	rit co	nsti	uc	tha		und	I ai	m a
Telephone The following per Surname Name(s) Date of birth Address Email Telephone 7. INVES I acknowled and accept the accept the selections.	d d d d d d d d d d d d d d d d d d d	/ / / / / / / / / / / / / / / / / / /	is r nd a ed t	RA my dany he I tital:	/ Line /	N to a que o o o o o o o o o o o o o o o o o o o	cqu cha aent goir plie	ain rac Ove	t m letteri eeson th	yse stice ew	d and delivership and delivers	mo with nvo d u	unt the olive nde	sp ela	ent tior ves	t on d ton d stmer the s d the	epende trisk trisk electeconte	da 	association investment as	perioci	ate	ed vent	F E with	Post Sense	rit co	nstr onfi	uc	tha	at I	und	I ai	m a

Page 3 of 3 5/2018