

## FUND MEMBERSHIP APPLICATION FORM

I Mr/Mrs/Dr/Ms/Prof..... of  
 [address].....  
 have read and understood the terms and conditions of joining the UKT Benevolent Fund  
 and agree to be bound by them.

I also advise that the following individuals (maximum of ten [10]), to be my nominated  
 immediate family members who in the instance of their unfortunate demise, I will be  
 supported under this Fund’s scheme:

	FULL OFFICIAL NAME	RELATIONSHIP

I have deposited [amount in Australian dollars]..... to the UKT Inc.  
 Benevolence Fund Bank Account - A/C No: 526480 BSB 034-212

This being (select one)

- The full requisite deposit of \$150.
- The initial part deposit of \$50 and I commit to clearing the balance of \$100 in two instalments.

My current email address is.....

My best contact mobile number is.....

Signed.....Date.....

**Instructions: Once you complete and sign this Nominees List Update Form, please scan and email it to umojakenyatownsville@gmail.com to the attention of Fund Secretary.**