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**OPTION TO PARTICIPATE IN THE TWO-POT SYSTEM**

I ………………………………………………………………………………….

Identity number………………………………,address ……………………… ……………………………………………………………………………………hereby wish to participate in the two-pot system, effective from ………………………………………..I declare that I was 55years or older by the 1st of March 2021. I further understand that this is my once-off irrevocable option and request the Fund to execute same accordingly.

Member’s Signature…………………………………………………………….

Witness 1………………………………………………………………………...

Full names……………………………………………………………………….

Witness 2………………………………………………………………………...

Full names………..……………………………………………………………...