

**Life Insurance Corporation of India**

Form of Nomination (For Minor Nominee)

I ..... the Life Assured under the within policy, hereby nominate my .....(relationship) named ..... aged ..... years and whose address is ..... as the person to whom the moneys secured under this policy shall be paid in the event of my death and I hereby appoint ..... as the person to receive the moneys secured by this policy in the event of my death during the minority of the nominee.

Signed at ..... this ..... day of ..... 2000.

Witness:

Signature:

Signature of the Life Assured.

Full Name: .....  
Occupation: .....  
Address : .....  
.....  
.....

I, the above named ..... (Appointee) do hereby endorse my consent to my appointment aforesaid.

Witness:

Signature:

Signature of the Appointee.

Full Name: .....  
Occupation: .....  
Address : .....  
.....  
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