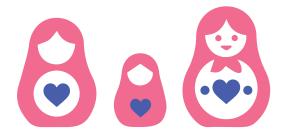
THE BEST BITS

However we plan, we don't always get time to prepare for the unexpected. Life is fragile. St. Canice's Credit Union Member Death Benefit Insurance Scheme can help your loved ones with the financial expenses in the event of your death.

- > Our new Member Death Benefit Insurance provides peace of mind for you and your family in one easy quick step.
- > To qualify for Member Death Benefit Insurance, you must be a member.
- > You are guaranteed acceptance into the scheme, once you are a member under the age of 71 years of age. A medical assessment is not required.*

HOW IT WORKS

- > Pay €72 per year per member. (This payment is deducted automatically by St. Canice's Credit Union directly from your account each year).
- > €2,500 will be paid towards your funeral expenses in the event of your death.
- >Available to all members under 71 years.
- > Complete and return the 'Opt In DBI Authorisation Form' which is part of this leaflet.



WE AIM TO MAKE OUR COMMUNITY A BETTER PLACE

St. Canice's Credit Union is a community based co-operative that exists only for the good of the people who live or work in our common bond areas in Kilkenny, Carlow, Tipperary and Laois. As well as contributing to the financial health of our members through savings and loans, the Credit Union is also involved in a huge range of community organisations and events.



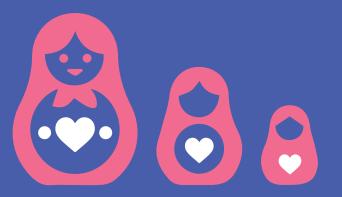
- Main Branch 78 High Street, Kilkenny
- Enquiries to any St. Canice's branch
- Email info@stcanicescu.ie
- Tel (056) 772 2042
- Website www.stcanicescu.ie
- Open 6 days a week

For a list of our branches and opening hours please check our website www.stcanicescu.ie



MEMBER DEATH BENEFIT INSURANCE

No matter what life brings, you can be covered.



MEMBER DBI OPT-IN/OPT-OUT FORM

To opt-in to the Member Death Benefit Insurance Scheme as provided by St. Canice's Kilkenny Credit Union Ltd. and arranged by CUNA Mutual Group Services (Ireland) Ltd.

...

MEMBER AUTHORISATION

I,AGE[] [
Member Number
wish to be included in the Member Death Benefit Insurance Scheme. I authorise the deduction of the annual fee from any of my accounts
I understand that it is my responsibility to have sufficent funds in my account to cover the cost of this insurance annually
I have read, understood and agree to be bound by the Terms & Conditions attached. (please tick all boxes above)
DATE OF BIRTH
CONTACT NO
EMAIL
SIGNATURE
DATE
CANCELLATION FORM
l,
Member Number
no longer wish to be included in the Member Death Benefit Insurance Scheme as provided by St. Canice's Kilkenny Credit Union Ltd. and arranged by CUNA Mutual Group Services (Ireland) Ltd.
Please stop the annual deduction from my account (please tick box)
DATE OF BIRTH D D M M Y Y Y
CONTACT NO.
EMAIL
SIGNATURE
DATE

IMPORTANT INFORMATION

*A pre-existing medical condition limitation applies to this Scheme. This means that cover is not provided if a member were to die from a pre-existing medical condition during the first six months of their membership of the programme. Terms and conditions apply.

St. Canice's Kilkenny Credit Union Ltd. Member Death Benefit Insurance is a group policy of the credit union and open to participation by members, subject to eligibility criteria outlined in the Key Facts & Policy Summary which are available on our website, in branch or can be requested by post at anytime.

The Scheme is arranged, on behalf of St. Canice's Kilkenny Credit Union Ltd. by CUNA Mutual Group Services (Ireland) Ltd. which is regulated by the Central Bank of Ireland.

The policy is underwritten by Utmost Pan Europe dac which is authorised by the Central Bank of Ireland.

The details provided in this application form together with any other information that is furnished to us in connection with this application will be retained and processed by St. Canice's Credit Union in accordance with our privacy statement which is available on our website www.stcanicescu.ie or in any branch.

HOW TO APPLY

- > Forms are available in any of our branches or can be downloaded on our website.
- > Fill in the form and hand to a member of staff or email it to info@stcanicescu.ie

TERMS AND CONDITIONS

I confirm that:

- I am a member of St. Canice's Credit Union and I am eligible to join the Member Death Benefit Insurance Scheme.
- I have read and understood the Key Facts & Policy Summary, which are available online or in branch or can be requested by post at any time.
- I understand that the insurer may opt not to renew the programme or vary the cost and/ or benefit upwards or downward at any stage in the future. This would be communicated to all members in the programme in advance of any changes.
- I will undertake to have sufficient funds in my Credit Union account to pay for the annual fee attaching to the provision of this Insurance cover and my inclusion in the Insurance Scheme.
- I understand that this is a scheme that will auto renew on an annual basis and the attaching fee will be deducted from my credit union account on this basis.
- I am aware that the benefits and costs of this Insurance may be varied annually but I will be informed of any such changes or updates through the Credit Union's website www.stcanicescu.ie, or by other means as agreed by St. Canice's Credit Union's Board of Directors.
- I understand that the scheme renews in January each year, where the full fee of €72 will be deducted.
 Enrolement is also possible for eligble members on a quartely basis thereafter, at a pro rata cost.
- I understand that if I wish to opt-out or cancel my participation in the Member Death Benefit Insurance Scheme, I will inform St. Canice's Credit Union in writing of my decision by completing the Member Death Benefit Insurance cessation form.
- I am aware that my participation in the Scheme will automatically stop should I cease to be a member of St. Canice's Credit Union or if there are insufficient funds in my account to cover the annual cost of my fee.
- I understand that the insurer can opt to terminate the Scheme and cover at the end of each cover period.
- The information I have provided to St. Canice's Credit Union is correct and I provide my consent to this information being shared with CUNA Mutual and its insurers, for the purpose of my membership of the Member Death Benefit Insurance Scheme.

