

Minor Beneficiary Appointment Form

Term Life Insurance

Policyholder Information

Full Name

Policy Number

Address

Phone Number

Minor Beneficiary Information

Full Name

Date of Birth

Relationship to Policyholder

Percentage (%)

Trustee/Custodian Information

*A trustee/custodian is required if the beneficiary is a minor (under legal age).

Full Name

Relationship to Minor

Address

Phone Number

Additional Instructions / Information

Policyholder Signature

Date

Trustee/Custodian Signature

Date