

Nomination Form – Member of the Equity Release Council Standards Board

Membership number

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I, the undersigned wish to record my nomination of

(Name) _____

Of (Firm name) _____

to serve as a (please indicate with a X)

a provider representative

an adviser representative

a solicitor representative

a surveyor representative

member of the Equity Release Council Standards Board.

Full Name: _____

Company: _____

Member firm type: Provider / Adviser / Solicitor / Surveyor / Other/general (please circle)

Signature _____ Date _____

Return to Kate Davies at kated@equityreleasecouncil.com or The Equity Release Council, 3rd Floor, Bush House, North West Wing, Aldwych, London, WC2B 4PJ by close of **business 20th February 2015**.