

UPDATE OF MEMBER DETAILS FORM

Date:

1. Surname: Other Name(s):

2. NSSF Number: Telephone Contact:

3. Email: Branch Visited:

4. Identification Number (NIN/Passport Number):

5. Details to be updated (Please select below):

☐ **Contact Update** (Ensure the new Contact is registered in the member's name).

Old Contact	New Contact

☐ **Name Update**

Old Name	New Name

☐ **Update Date of Birth**

Old Date of Birth	New Date of Birth

☐ **Spouse Update.** *NB: In case spouse has no NIN, provide their parents' Name.*

Name of spouse(s)	Add/ Delete/ Edit	Date of Birth	Spouse's NIN	Contact
1.				
2.				
3.				
4.				

☐ **Update Child(ren).** *NB: In case child has a NIN, just provide their NIN in place of parents' Name.*

Name of Child(ren)	Add/ Delete/ Edit	Date of Birth	Mother's Name	Father's Name
1.				
2.				
3.				
4.				
5.				

6. Summary of Request:

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LEFT THUMBPRINT	LEFT POINTER	RIGHT POINTER	RIGHT THUMBPRINT	Member's Signature:
				Date:

Witnessed By: NSSF Officer's Name:

Title: Signature: Date: