



Sandals® Select Rewards Membership Program

NOTICE OF DEATH OF PRIMARY MEMBER AND

REQUEST TO MAKE SECONDARY MEMBER THE PRIMARY MEMBER OR

TRANSFER AWARDS POINTS TO ACCOUNT OF DESIGNATED FAMILY MEMBER OR CHILD

The Terms and Conditions governing the Sandals® Select Rewards Membership Program (the “SSR Program”) can be accessed at <https://sandalsselect.co.uk/terms/>. The SSR Program’s Terms and Conditions control if there is a conflict with this form. This completed form must be timely sent by e-mail to select@sandals.com with a certified copy of the official death certificate of the deceased SSR Program Primary Member (“Deceased Primary Member”) and any other required documentation.

<u>Deceased Primary Member</u>	
Name of Deceased Primary Member	
Last Home Address	
Deceased Primary Member’s Account Number	
Date (month, date, year) of Death	
Place of Death	

Requesting Person’s Information

Full Name (“Requestor”): _____

Home Address: _____

Mobile number: _____ E-mail address: _____

Relationship to Deceased Primary Member: _____

Requestor’s Date of Birth: _____

Requestor is (must select only one):

- The Secondary Member on the Deceased Primary Member’s Account and requests to become the Primary Member on the Deceased Primary Member’s Account. OR
- The Designated Family Member on the Deceased Primary Member’s Account and there is either no Secondary Member on the Deceased Primary Member’s Account or the Secondary Member on the Deceased Primary Member’s Account is unavailable to become the new Primary Member, such that Requestor requests a transfer of the Awards Points from the Deceased Primary Member’s Account to the



Requestor's SSR Program Account number _____. Requestor understands and agrees that the Deceased Primary Member's SSR Program membership tier status / level will not be transferred to Requestor. OR

- The child of the Deceased Primary Member, there is either no Secondary Member on the Deceased Primary Member's Account or the Secondary Member on the Deceased Primary Member's Account is unavailable to become the new Primary Member and there is no Designated Family Member on the Deceased Primary Member's Account. Accordingly, Requestor requests a transfer of the Awards Points from the Deceased Primary Member's Account to the Requestor's SSR Program Account number _____. Requestor understands and agrees that the Deceased Primary Member's SSR Program membership tier status / level will not be transferred to Requestor.

Requestor represents and warrants to Unique Travel Corp that the following are true and correct: (i) Requestor is at least 18 years old; (ii) the statements and information provided by Requestor to Unique Travel Corp, including the information on this form, is true and correct; (iii) the documentation submitted by Requestor to Unique Travel Corp in connection with this form is authentic and accurate; (iv) Requestor has read the terms and conditions governing the SSR Program and certifies that this request fully complies with the terms and conditions; (v) Requestor has submitted an accurate certified copy of the Deceased Primary Member's official death certificate; (vi) this request does not and will not violate the SSR Program's terms and conditions, any law, testament, will, or trust, nor infringe or violate on the rights of others; (vii) Requestor has all necessary authority, right and consent to make this request; (viii) to the best of Requestor's knowledge and belief after making reasonable inquiry, no other family member of the Deceased Primary Member has, will, or intends to submit a competing or conflicting request to the Deceased Primary Member's Account or its Awards Points; and (ix) any Secondary Member (other than, as applicable, Requestor) on the Deceased Primary Member's Account is unavailable to become the new Primary Member.

Requestor agrees to fully indemnify and hold harmless Unique Travel Corp and its affiliates, directors, officers, employees, agents, successors and assigns from any claim contrary to Requestor's representations and warranties or arising from or relating to this request, including, but not limited to, any competing request to the Deceased Primary Member's Account or Awards Points.

By signing below, Requestor declares and affirms under penalty of perjury that the foregoing is true and correct.

REQUESTOR:

By: _____ (Signature)

Print Name: _____

Date: _____

If there is a Secondary Member on the Deceased Primary Member's Account who is not the Requestor, then the Secondary Member must sign below or the Requestor must provide a written explanation with documentation (e.g., certified official death certificate for Secondary Member) substantiating that the Secondary Member is unavailable to become the Primary Member on the Deceased Primary Member's Account: _____



I, the Secondary Member on the Deceased Primary Member's SSR Program Account, by my signature below attest, under penalty of perjury, that I am unavailable (unable or unwilling) to become the new Primary Member on the Deceased Primary Member's Account, that I consent to my removal as Secondary Member on the Deceased Primary Member's Account, that I consent to Requestor's requested transfer of Awards Points from the Deceased Primary Member's Account to the Requestor's Account, and that I consent to the closure of the Deceased Primary Member's Account following the requested transfer of Awards Points to Requestor's account.

SECONDARY MEMBER:

By: _____ (Secondary Member's Signature)

Print Name: _____

Date: _____