

CODICIL FORM.

EXCELLENCE FOR ALL

If you have already made your will and would like to add a bequest to the Tonbridge School Foundation, you can use this codicil form. Please note that any codicil must be signed and witnessed in the same way as a will. Once completed, the form must be attached and stored with the original copy of your will. We suggest that you check any alterations to your will with your solicitor.

For further information please contact:
Tonbridge Society
01732 304253
tara.biddle@tonbridge-school.org

Thank you for your support.

YOUR DETAILS

I _____
(full name)

of: _____

_____ Postcode: _____
(full address)

declare this to be the _____ (first, second, etc.) codicil to my last will dated and made the _____ day of _____ 20 _____

I give free of tax to the Tonbridge School Foundation the sum of: £ _____

or the Index Linked* sum of: £ _____

or _____% of the residue of my estate absolutely for the advancement of education at Tonbridge School. I direct that the receipt of the person appearing to my trustees to be the Director or other proper officer for the time being of the Tonbridge School Foundation shall be a full discharge to my trustees who shall not thereafter be concerned as to the application of this gift.

* The phrase Index Linked sum means:

The amount specified (the Original Amount) as multiplied by the index figure in the Retail Price Index for the month immediately before my death and then divided by the index figure for the month in which this codicil is executed.

If the Retail Price Index is no longer in existence at my death or the basis of its computation has been altered, my trustees shall compute the Index Linked sum in accordance with such formula as seems in their absolute discretion to be fair and reasonable so as to enable the Original Amount to be increased in accordance with inflation.

Continued overleaf



TONBRIDGE
SCHOOL

Tonbridge. Today, tomorrow, together.

DECLARATION

In all other respects, I confirm my said will.

As witness my hand this _____ day of _____ 20 _____

Signed by the testator as a _____ (first, second, etc.) codicil to the will in our presence.

_____ signature of testator
and then by us together in his presence and in the presence of each other.

FIRST WITNESS

Signature of witness:	Date:
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Name: _____

Address: _____

Postcode: _____

SECOND WITNESS

Signature of witness:	Date:
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Name: _____

Address: _____

Postcode: _____

Registered Charity No. 1099162