

PROXY FORM

Know All Men by These Presents:

That I, a policyholder and member of The Insular Life Assurance Company, Ltd. ("Company"), do hereby nominate, constitute, and appoint my proxy below to attend and vote on my behalf at the Annual Members' Meeting of the Company, and at any and all regular or special meetings of the members, and any adjournment thereof: *(please check one)*

Proxy Committee, pursuant to Section 3.4.2 of the Company's By-Laws, as amended, composed of the Chairman of the Board, the Chief Executive Officer, the President, the Corporate Secretary, and the most senior Independent Trustee in terms of tenure as such Independent Trustee; or

Name: ___

(Please indicate full name of your proxy and provide contact details.)

Mobile Number: _____

Email Address: _____

In case of his/her non-attendance, I authorize the Chairman of that Meeting to fully exercise all rights as my proxy at such meeting.

This proxy shall be valid and effective for a period of five (5) years from the time I become entitled to vote in accordance with the By-Laws of the Company.

Signed this ____ day of _____, 20___ at _____.

Signature over Printed Name of Policyholder/Member