



ADDITION OF DEPENDANTS

POLICY INFORMATION

Membership No: Date:

Name: Surname:

ID No: Scheme Name:

Current Premium: New Premium:

Physical Address:

.....

.....

Tel Number: () Cell Number:

Kindly update my policy by **ADDING** the following people in my policy number:

NAME AND SURNAME	ID NUMBER	RELATIONSHIP	PREMIUM

Terms and conditions:

1. Waiting period of all the new added dependents shall depend on the terms and conditions of the existing policy.
2. Maximum age at entry for spouse is 75 years.
3. Maximum age at entry for children is 20 years. (Scheme)
4. Maximum age at entry for ext. children is 18 years. (Scheme)

Declaration:

1. I declare to the best of my ability and belief that the particulars given above are true and correct.
2. I understand and acknowledge the terms and conditions with regarding to the amendment of my policy.
3. I fully understand that the premiums may be affected due to the amendment of the policy.

Thus signed and dated:

Signed at:on this dayof (month)20.....

Signature of Main Member: Full Name:

Signature of Agent: Full Name: Branch: