

2022 HEALTH INSURANCE | MEMBER PROFILE UPDATE FORM

1. UPDATE YOUR PROFILE

Section 2 is compulsory to complete to ensure we have your most up to date details.

What change should we make to your profile?

- Appoint a new broker (Complete Sections 2, 3 & 6)
- Change my debit order details (Complete Sections 2, 4 & 6)
- Appoint a beneficiary to receive the **Accidental Death Payout Benefit** (Complete Sections 2, 5 & 6)

For other profile updates that aren't listed here, email us at yoursupport@stratumbenefits.co.za with your request.

2. PRINCIPAL INSURED DETAILS

Please complete all fields in this section.

Title		Name																	
Surname																			
ID/Passport											Date of Birth			-			-		
Cellphone						Alternative Contact No.													
Email Address																			
Physical/Postal Address													Postal Code						

3. APPOINT A NEW BROKER

If a broker is already noted on your Health Insurance policy, we'll let them know that you've appointed another broker to advise you on your cover going forward.

New Brokerage	New Broker

PROFESSIONAL FEE

If a professional fee (broker fee) is being paid to the current broker, the fee won't automatically be paid to the newly appointed broker unless you instruct us to.

Professional fees are optional, and if agreed to, will be paid to the appointed broker on a recurring basis over and above the monthly commission amount.

Optional Professional Fee (Increments of R10)		Product Premium R		Total Monthly Premium R		Account Holder Signature	
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4. CHANGE DEBIT ORDER DETAILS

By signing this section you:

1. understand that cover will commence after the first premium is received.
2. authorise Stratum Benefits to debit your account for the policy premium that's payable in advance on the debit order date as selected.
3. authorise Stratum Benefits to accept this debit order authority as a payment instruction issued by the account holder.
4. accept that depending on the selected debit order date a double or triple debit may be incurred.
5. agree that this debit order authority will remain in force until cancelled in writing by the principal insured person, by Stratum Benefits if premiums aren't received for two consecutive months, if the account being debited is closed, the account holder is deceased or if authority to debit isn't granted.
6. understand that this debit order authority may only be assigned to a third party if this contract is also assigned to a third party.
7. understand that if your payment date falls on a Sunday, or recognised South African public holiday, the debit order date will default to the next working day.
8. accept that if the premium from a previous debit order deduction is returned, a **R 25** admin fee will be added to the next premium deduction.
9. accept that your premium may be adjusted during an annual renewal, or due to benefit restructuring necessitated by legislation, with one month's written notice and subject to your right of cancellation of cover, the debit order authority will extend to the adjusted premium.
10. understand that your debit order deductions will be processed through a computerised system provided by the South African Banks. Details of each debit order deduction will be displayed on your bank statement with the reference prefix "STRATUM", followed by an 8 digit number ending with "NETCASH".
11. accept that given the debit order authority granted by you, it's your responsibility to ensure that premiums are collected in order to remain covered.
12. accept that you'll not be entitled to any refund of amounts that have been deducted while this debit order authority is in force, if such amounts were legally due.
13. understand that the product premium is inclusive of VAT.

Bank		Account Number															
Account Holder																	
Account Type	Term		Debit Order Date														
<input type="radio"/> Cheque <input type="radio"/> Savings	<input type="radio"/> Monthly <input type="radio"/> Annual	<input type="radio"/> 1st <input type="radio"/> 4th <input type="radio"/> 7th <input type="radio"/> 15th <input type="radio"/> 20th <input type="radio"/> 25th <input type="radio"/> 28th <input type="radio"/> Last day of the month															
Optional Professional Fee (Increments of R10)		Product Premium R		Total Monthly Premium R		Account Holder Signature											

5. NOMINATION OF BENEFICIARY | ACCIDENTAL DEATH BENEFIT

The **Emergency & Accident Benefit Option** offers an **Accidental Death Benefit** that covers you and your registered spouse if either one of you passes away due to an accident. The benefit will be paid out to your and your registered spouse's nominated beneficiary. If you don't nominate beneficiaries, the benefit will be paid out to your respective estates. The **Accidental Death Benefit** also covers a child dependant if death is due to a motor vehicle accident. The benefit for a child dependant will be paid out to the principal insured person on the policy.

The **Policy Schedule** that you'll receive when your policy is activated explains the full terms and conditions of this benefit.

NOMINATION BY THE MAIN APPLICANT

Title	<input type="text"/>	Name	<input type="text"/>	Surname	<input type="text"/>
ID/ Passport	<input type="text"/>	Relationship	<input type="text"/>		
Contact Details	<input type="text"/>	Alternative Contact Details	<input type="text"/>		

NOMINATION BY THE SPOUSE

Title	<input type="text"/>	Name	<input type="text"/>	Surname	<input type="text"/>
ID/ Passport	<input type="text"/>	Relationship	<input type="text"/>		
Contact Details	<input type="text"/>	Alternative Contact Details	<input type="text"/>		

Subject to the terms and conditions of your policy or limitations imposed by law at the time of a claim, you understand that:

- the nominated beneficiary will receive proceeds payable under the **Accidental Death Benefit**;
- you may nominate a beneficiary of your choice;
- if the beneficiary is a minor when the benefit amount is payable, the benefit amount will be paid to the minor's legal guardian, trust or any person we're authorised to pay under the relevant law;
- you may amend the nomination at any time, however, nominations aren't effective until it's confirmed in writing by the Insurer; and that
- the benefit amount payable will be based on the latest valid beneficiary nomination that we've received and that the Insurer accepted.

Main Applicant Signature	<input type="text"/>	Date	<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>
Spouse Applicant Signature	<input type="text"/>	Date	<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>

6. DECLARATION ACCEPTANCE

As the principal insured, I hereby declare that all the information provided is true and correct. I accept that any non-disclosure or misrepresentation may render my policy null and void.

Principal Insured Signature	<input type="text"/>	Date	<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>
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Email health@stratumbenefits.co.za

Please enquire if you haven't received feedback within **7 working days** from submitting your Profile Update Form



Administered by Unity Health, a division of Ambledown Financial Services (Pty) Ltd, an authorised FSP 10287. In partnership with Stratum Benefits (Pty) Ltd, an authorised FSP 2111, underwritten by Constantia Insurance Company Limited, an authorised FSP 31111. Terms and conditions apply.



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