



### 3. Do you need to change banking details for an MSA refund, or contact details due to resignation?

Change banking details for MSA refund Yes  No

Update contact details due to resignation Yes  No

You need to submit specific supporting documentation with this form if the account holder is **not** you:

#### Supporting documentation required

Please send the completed 'Continuation' form back to us with the documents under each type of bank account, if necessary. Please only send the documents relevant to your update. These documents are only applicable or needed when you are using one of the bank account types listed below.

#### When using another person's bank account (for example, spouse, aunt, uncle, friend, father, son):

- Proof of the account, e.g. bank statement or letter from the bank on a bank letterhead, not older than three months from date of submission
- A copy of the ID, passport or driver's licence of the bank account holder

#### When using a joint account:

- Proof of the account, e.g. bank statement or letter from the bank on a bank letterhead, not older than three months from date of submission
- A copy of the ID, passport or driver's licence of each of the joint account holders

#### When using a company account:

- Proof of the account, e.g. bank statement or letter from the bank on a bank letterhead, not older than three months from date of submission
- A copy of the ID, passport or driver's licence of each signatory or person who has authority to sign on behalf of the company
- A letter of authority including the details of all the persons of authority and the Bankmed membership details
- A copy of the company's certificate of registration

#### When using a trust account:

- Proof of the account, e.g. bank statement or letter from the bank on a bank letterhead, not older than three months from date of submission
- A copy of the ID, passport or driver's licence of each of the trustees of the account
- A copy of the trust's certificate of registration
- A copy of the trust resolution, confirming the trustees

#### If the account is in your name as the Principal Member, but we are unable to verify the account details with the bank, please supply:

- Proof of the account, e.g. bank statement or letter from the bank on a bank letterhead, not older than three months from date of submission
- A copy of your ID, passport or driver's licence

Once the application form has been fully completed, and you have sourced all of the supporting documents, kindly e-mail all documents to [administration@bankmed.co.za](mailto:administration@bankmed.co.za). Please ensure that your images are scanned clearly before e-mailing them to us.

### 4. New banking details for MSA refund (if applicable)

When should we start using the new banking details?

Please note that we cannot backdate banking detail changes and these details will come into effect from the date that they are loaded onto the system.

Please confirm who the **account holder** is by choosing the correct option:

Principal Member (you)  Someone else  Company  Trust

Bank name

Branch name  Branch code

Account number  Type of account Cheque  Savings

Account holder name

Signature of account holder  Date

### 5. Update contact details due to resignation (if applicable)

Telephone (H)       Telephone (W)

Cellphone

**Physical address**

Unit number       Complex name

Street number       Street name

Suburb

City  Postal code

E-mail

E-mail type Home  Work

**6. Banking detail change instruction, terms and conditions, and privacy statement**

6.1. I/We, the undersigned:

- 6.1.1. Warrant that the account information I/we have provided above is an account in my/our name and that the information furnished by me/us in this authority is true and correct;
- 6.1.2. Undertake to advise the Scheme in writing of any changes to my account details and acknowledge that the Scheme will not be held responsible or liable for any claim, loss or harm that I or any third party may suffer as a result of:
  - 6.1.2.1. me providing incorrect banking details herein, or
  - 6.1.2.2. if the bank account is in the name of another person, or entity, or
  - 6.1.2.3. as a result of my failure to notify the Scheme of a change in banking details.
- 6.1.3. In the event of resignation, I am not entitled to any refund of any contributions or amounts due that was withdrawn by the Scheme whilst my membership was active and in force if such contributions or amounts were legally owing to the Scheme in terms of the Agreement;
- 6.1.4. Furthermore, as the Principal Member I confirm that:
  - 6.1.4.1. I will be liable for any claims, losses or damages of whatsoever nature should this account be incorrect or be held in the name of any other person;
  - 6.1.4.2. I hereby authorise the Scheme to verify the banking details as provided above for the purposes of refunding any MSA due to me after resignation.
  - 6.1.4.3. the account listed above complies with the Financial Intelligence Centre Act ("FICA").

6.2. **Privacy Statement**

We process your personal information in accordance with the provisions of our Privacy Statement. Please read our [Privacy Statement](#) on the Bankmed Website.

By accepting these Terms and Conditions and/or by providing personal information to us, you agree and give consent to the provisions of our Privacy Statement. If you do not agree or give consent to us using your personal information, we may not be able to provide our products or services to you. If you believe we have acted contrary to these provisions, please contact us on 0800 BANKMED (0800 226 5633).

6.3. **Confirmation of acceptance of Agreement, inclusive of terms and conditions, and privacy statement**

6.3.1. **Account holder**

Please only sign if you have read and understood the Agreement, inclusive of debit order mandate, terms and conditions, and privacy statement.

I, , in my capacity as the account holder, with

ID/passport number                      hereby confirm my acceptance of the Agreement,

inclusive of the debit order mandate, terms and conditions, and Privacy Statement.

Furthermore, I confirm and agree the following:

- 6.3.1.1. I give the Scheme, acting in their relevant capacities, permission to update the Principal Member's banking details as set out above;
- 6.3.1.2. I will be liable for any claims, losses or damages of whatsoever nature arising due to banking details being incorrect.
- 6.3.1.3. I hereby authorise the Scheme to verify the banking details as provided above for the purposes of refunding any MSA due to me after resignation.
- 6.3.1.4. the account listed above complies with the Financial Intelligence Centre Act ("FICA").

Signed at (town or city)

Account holder's signature

Date

**Original hand signature required**

**6.3.2. Principal Member**

Please only sign if you have read and understood the Agreement, inclusive of debit order mandate, terms and conditions, and privacy statement.

I, , in my capacity as the Principal Member

ID/passport number

hereby confirm my acceptance of the Agreement, inclusive of the debit order mandate, terms and conditions, and Privacy Statement. Furthermore, I confirm and agree the following:

- 6.3.2.1. I give the Scheme, acting in their relevant capacities, permission to change my banking details as set out above;
- 6.3.2.2. that I have the right to give the Scheme the authority to change these banking details.
- 6.3.2.3. I will be liable for any claims, losses or damages of whatsoever nature arising from banking details supplied that are incorrect or be held in the name of any other person.
- 6.3.2.4. I hereby authorise the Scheme to verify the banking details as provided above for the purposes of refunding any MSA due to me after resignation.
- 6.3.2.5. the account listed above complies with the Financial Intelligence Centre Act ("FICA").

Signed at (town or city)

Principal Member's signature

Date

**Original hand signature required**