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Application for registration of newborn baby 2019

Who we are

The Anglovaal Group Medical Scheme (referred to as 'the Scheme'), registration number 1571, is the medical scheme that you are applying to become a member of. This is a non-profit organisation, registered with the Council for Medical Schemes.

Discovery Health (Pty) Ltd (referred to as 'the administrator') is a separate company and an authorised financial services provider (registration number 1997/013480/07). We take care of the administration of your membership for the Scheme.

When you sign this application, you confirm that you have read and understood the rules for membership and agree to them.

Please note: All newborn babies must be registered with the Scheme within 90 days of birth. For us to accept your newborn baby without any conditions you must register your newborn baby within 90 days of his or her birth and cover must start from the date of birth. If you do not register your baby from the day he or she is born, you have to pay backdated contributions.

If you are applying after 90 days from birth of your newborn baby or you want the cover to start on any other day after the date of birth, we may apply certain conditions to your baby's membership with the Scheme. You will need to complete a different application called "Anglovaal Group Medical Scheme Application for addition of dependant/s".

How to complete this form

- 1. Please use one letter per block, complete in black ink and print clearly.
- 2. Submit the signed and completed document to your HR department.
- 3. Please attach a copy of your newborn baby's birth certificate.
- 4. To avoid administration delays, please make sure this form is completed in full.

1. Main member's details

Membership number	Employee number	
Member's name		
Member's surname		
2. Newborn's details		
2.1 First name/s	Surname	
ID number		
Date of birth	When do you want cover to start Y Y Y M M D D	
Gender F		
Is your newborn your biological child Yes 🗌 No 🗌 or is your newb	porn adopted or fostered? Yes 🗌 No 🗌	
If your newborn is adopted or fostered, please supply legal proof of adoptic	on or foster care arrangement.	
2.2 First name/s	Surname	
ID number		
Date of birth	When do you want cover to start Y Y Y M M D D	
Gender F		
Is your newborn your biological child Yes 🗌 No 🗌 or is your newb	orn adopted or fostered? Yes 🗌 No 🗌	
If your newborn is adopted or fostered, please supply legal proof of adoption or foster care arrangement.		

2. Newborn's details (continued)	
2.3 First name/s Surname ID number ID	
Date of birth Y Y Y M D D When Gender M F When	n do you want cover to start Y Y Y M M D D
Is your newborn your biological child Yes \square No \square or is your newborn adopted or	
If your newborn is adopted or fostered, please supply legal proof of adoption or foster care	e arrangement.
3. Parents' details	
Parent 1 surname	
Parent 1 first name	
Parent 2 surname	
Parent 2 first name	
I,	(first name and surname) as the main as a dependant/s. I also confirm that all the information
Signed at (town or city)	on Y Y Y M M D D
Signature of main member Please do not sign an incomplete application form I confirm the information is accurate and complete	
4. Approval from employer	
Name	Company stamp
Signature	
Designation	Date Y Y Y M M D D

Please register your newborn with the department of Home Affairs within 21 days from birth and give Anglovaal Group Medical Scheme a copy of the birth certificate as soon as possible.

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Anglovaal Group Medical Scheme. Registration number 1571. Administered by Discovery Health (Pty) Ltd, registration number 1997/013480/07, an authorised financial services provider.