



Permission to change banking details

This is a form to change banking details

Who we are

The Anglovaal Group Medical Scheme (referred to as 'the Scheme'), registration number 1571. 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.

How to complete this form

1. Please use one letter per block, complete in black ink and print clearly.
2. To avoid administration delays, please ensure this application is completed in full.
3. You need to submit the following with this form:
 - Copy of ID
 - Bank statement/letter of confirmation from the bank not older than 3 months.
4. Please fax this completed and signed form with any supporting documentation to 011 539 2766 or email it to anglovaaladmin@discovery.co.za
5. When you sign this application, you confirm that you have read and understood the rules for membership and agree to them.
6. Alternatively, you can update your bank details by visiting www.avgms.co.za if you are a registered web-user.

1. What would you like to change?

Debit order details Claim payment details Both

2. Main member details

Membership number

ID number

3. New account details for Debit Orders

We will start using these banking details once they are loaded onto the system.

Please note that we cannot accept credit card details

Accountholder

Bank

Account number

Type of account Cheque Savings

Branch number - - - Branch name

4. New account details for Claims Payments

When should we start using the new banking details? 2 0 Y Y M M D D

As per debit order details

Please note that we cannot accept credit card details.

Accountholder

Bank

Account number Branch number - - -

Type of account Cheque Savings

Branch name

