

FundsAtWork Family Protector - plus options

Please fill in this form in the fields provided. Use the tab key to move from one field to the next.
If you increase your cover or add lives to your benefit, a waiting period of 6 months will apply.
You may also log into our website at www.momentum.co.za and make changes to your Family Protector benefit electronically.

Member number

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Before you complete this form, please make sure that:

- You have read your member guide.
- You have read your benefit statement, you know which benefits you have, and you can flex your benefits.

If you have any queries about your Family Protector benefits, speak to your financial adviser or you may contact the Client Contact Centre on 0860 65 75 85.
Please fill in the sections that apply to you.

Section 1: Employer details

Employer's name	<input type="text"/>
Employee number	<input type="text"/>
Scheme code	<input type="text"/>

Section 2: Member details

Title	<input type="text"/>	Initial(s)	<input type="text"/>	First name	<input type="text"/>	
Surname	<input type="text"/>					
Date of birth	<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
RSA ID	Yes <input type="checkbox"/>	No <input type="checkbox"/>	ID/passport number	<input type="text"/>		
Passport country of origin	<input type="text"/>					
Income tax number	<input type="text"/>					
Email address	<input type="text"/>					
Alternative email address	<input type="text"/>					
Cellphone number	<input type="text"/>	Alternative number	<input type="text"/>			
Residential address	<input type="text"/>					
Unit number	<input type="text"/>	Complex (if applicable)	<input type="text"/>			
Street number	<input type="text"/>	Street/farm name	<input type="text"/>			
Suburb/district	<input type="text"/>					
City/town	<input type="text"/>			Postal code	<input type="text"/>	
Postal address	<input type="text"/>					
Unit number	<input type="text"/>	Complex (if applicable)	<input type="text"/>			
Street number	<input type="text"/>	Street/farm name	<input type="text"/>			
Suburb/district	<input type="text"/>					
City/town	<input type="text"/>			Postal code	<input type="text"/>	

Section 3: Funeral benefit

Funeral benefit base for you and your spouse(s)

- The Family Protector funeral benefit base for you and your spouse(s) is R20 000.
- A maximum of two spouses will be covered.

Changing cover for you and your spouse(s)

- The cover for you and your spouse(s) must always be changed together.
- The premium is R6 per month per R2 500 of additional cover for you and your spouse(s).
- If you increased the funeral cover for you and your spouse(s) in the past, you can reduce the cover to the funeral benefit base amount.

Do you want to increase or decrease cover for you and your spouse(s)?

Increase

Decrease

By how much do you want to change the cover for you and your spouse(s)?

R2 500 <input type="checkbox"/>	R5 000 <input type="checkbox"/>	R7 500 <input type="checkbox"/>	R10 000 <input type="checkbox"/>	R12 500 <input type="checkbox"/>	R15 000 <input type="checkbox"/>
R17 500 <input type="checkbox"/>	R20 000 <input type="checkbox"/>	R22 500 <input type="checkbox"/>	R25 000 <input type="checkbox"/>	R27 500 <input type="checkbox"/>	R30 000 <input type="checkbox"/>

Details of spouse 1

Title Initial(s) First name

Surname

Date of birth - -

RSA ID Yes No ID/passport number

Passport country of origin

Details of spouse 2

Title Initial(s) First name

Surname

Date of birth -

RSA ID Yes No ID/passport number

Passport country of origin

Funeral cover for children

Family Protector funeral benefit base

- The funeral benefit base for children 14 years and above is R20 000.
- The funeral benefit base for all children under 14 years and stillborn is R10 000.
- Up to five children are covered.

Changing cover for children

- Your children's cover may not exceed the cover amount of you and your spouse(s).
- You must choose the same amount of cover for all your children in a particular age category. Keep in mind that a legislated maximum cover amount per age group applies:
 - R10 000 for children under 6 years.
 - R30 000 for children between 6 and 14 years.
 - R50 000 for children over 14 years.
- The premium is R3 per month per R2 500 additional cover per child.
- If you increased the funeral cover for your children in the past, you can reduce the cover to the funeral benefit base amount.

Do you want to increase or decrease the funeral cover for your children?

Increase

Decrease

If you have chosen an amount that is higher than the cover restriction per age group, the maximum amount for that specific age group will be paid out, but as soon as the child moves up into the next age group the new maximum cover amount will apply. This way you don't need to adjust the amount all the time as it will automatically increase as your child gets older.

By how much do you want to change the cover for your children?

R2 500 <input type="checkbox"/>	R5 000 <input type="checkbox"/>	R7 500 <input type="checkbox"/>	R10 000 <input type="checkbox"/>	R12 500 <input type="checkbox"/>	R15 000 <input type="checkbox"/>
R17 500 <input type="checkbox"/>	R20 000 <input type="checkbox"/>	R22 500 <input type="checkbox"/>	R25 500 <input type="checkbox"/>	R27 500 <input type="checkbox"/>	R30 000 <input type="checkbox"/>

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Details of child 1

Title Initial(s) First name

Surname

Date of birth -

RSA ID Yes No ID/passport number

Passport country of origin

Details of child 2

Title Initial(s) First name

Surname

Date of birth -

RSA ID Yes No ID/passport number

Passport country of origin

Details of child 3

Title Initial(s) First name

Surname

Date of birth -

RSA ID Yes No ID/passport number

Passport country of origin

Details of child 4

Title Initial(s) First name

Surname

Date of birth -

RSA ID Yes No ID/passport number

Passport country of origin

Details of child 5

Title Initial(s) First name

Surname

Date of birth -

RSA ID Yes No ID/passport number

Passport country of origin

Additional lives**Children**

- You can add a maximum of two children.
- The premium is R1 per month per additional child for base (14 years old and above: R20 000; under 14 years and stillborn: R10 000).
- If you added children in the past, you can remove or reduce them to the number of children covered on the funeral benefit base.

Do you want to add or remove any children? Add Remove

How many children do you want to add or remove? 1 2

Details of child 6

Title Initial(s) First name

Surname

Date of birth -

RSA ID Yes No ID/passport number

Passport country of origin

Details of child 7

Title Initial(s) First name

Surname

Date of birth - -

RSA ID Yes No ID/passport number

Passport country of origin

Parents and parents-in-law

When you add cover for your parents and/or parents-in-law:

- You can add a maximum of two parents and two parents-in-law.
- The maximum cover is R6 000 per person.
- The maximum age of a parent is 74 on the date this form is completed and submitted.
- The premium is R9 per month per R3 000 cover per person.
- If you added your parents and/or parents-in-law in the past, you can remove them if the cover is no longer required.

Do you want to add or remove your parents and/or parents-in-law? Add Remove

How many parents/parents-in-law do you want to cover? 1 2 3 4

How much cover do you require for each parent/parent-in-law?

Parent 1	<input type="text"/> R3 000 <input type="checkbox"/>	<input type="text"/> R6 000 <input type="checkbox"/>
Parent 2	<input type="text"/> R3 000 <input type="checkbox"/>	<input type="text"/> R6 000 <input type="checkbox"/>
Parent-in-law 1	<input type="text"/> R3 000 <input type="checkbox"/>	<input type="text"/> R6 000 <input type="checkbox"/>
Parent-in-law 2	<input type="text"/> R3 000 <input type="checkbox"/>	<input type="text"/> R6 000 <input type="checkbox"/>

Details of parent 1

Title Initial(s) First name

Surname

Date of birth - -

RSA ID Yes No ID/passport number

Passport country of origin

Address of parent (if different from own)
Residential address

Postal code

Details of parent 2

Title Initial(s) First name

Surname

Date of birth - -

RSA ID Yes No ID/passport number

Passport country of origin

Address of parent (if different from own)
Residential address

Postal code

Details of parent-in-law 1

Title Initial(s) First name

Surname

Date of birth - -

RSA ID Yes No ID/passport number

Passport country of origin

Address of parent-in-law (if different from own)
Residential address

Postal code

Details of parent-in-law 2

Title Initial(s) First name

Surname

Date of birth -

RSA ID Yes No ID/passport number

Address of parent-in-law (if different from own)
Residential address

Postal code

Section 4: Education benefit**Education benefit base**

- If you pass away, R10 000 is paid per child for their education.
- Up to 5 children are covered.

Changing your children's education benefit

- You can change the cover in increments of R10 000.
- The maximum total cover for all children is the lesser of 5 times your annual salary or R2 million.
- The premium is R5 per month per additional R10 000 per child.
- If you increased your children's cover in the past, you can reduce it to the education benefit base amount.

Do you want to increase or decrease your children's cover?

Increase Decrease

What additional cover amount do you want for your children or how much do you want to reduce the cover by?

R

Details of child 1

Title Initial(s) First name

Surname

Date of birth -

RSA ID Yes No ID/passport number

Passport country of origin

Details of child 2

Title Initial(s) First name

Surname

Date of birth -

RSA ID Yes No ID/passport number

Passport country of origin

Details of child 3

Title Initial(s) First name

Surname

Date of birth -

RSA ID Yes No ID/passport number

Passport country of origin

Details of child 4

Title Initial(s) First name

Surname

Date of birth -

RSA ID Yes No ID/passport number

Passport country of origin

Details of child 5

Title Initial(s) First name

Surname

Date of birth - -

RSA ID Yes No ID/passport number

Passport country of origin

Changing the number of children

- You can add a maximum of two children.
- The premium is R5 per month per R10 000 per child.
- If you added children in the past, you can remove them.

Do you want to add or remove any children?

How many children do you want to add or remove?

Details of child 6

Title Initial(s) First name

Surname

Date of birth - -

RSA ID Yes No ID/passport number

Passport country of origin

Details of child 7

Title Initial(s) First name

Surname

Date of birth - -

RSA ID Yes No ID/passport number

Passport country of origin

Section 5: Health premium waiver plus

Name of medical scheme

Medical scheme number

- You can only make changes once a year in January.
- The premium for Momentum Medical Scheme members is R11 per month for every year chosen for death and R5 per month for every year chosen for disability.
- The premium for members on any other medical scheme is R15 per month for every year for death and R7 per month for every year for disability.
- If you have disability and death benefits, you must make changes for these benefits together, ie, if you change your cover for death, you must change it for disability too. This means you will pay R16 per month if you are a member of Momentum Medical Scheme and R22 if you are a member of any other scheme.
- You can change the number of years you are covered for or remove the benefit completely.

How many years of cover do you want?

Section 6: Declaration by member

I, (full names)

declare that:

- all particulars included in this form are true and correct.
- I understand the Family Protector benefit plus options that is available to me.
- I am aware of the effect the change in the Family Protector benefit will have on my take-home pay or contributions towards my retirement fund.
- I indemnify Momentum Corporate against any claim, loss and/or damage that may arise from executing the choices in this form.

I agree that Momentum Corporate may process all information that I provide on this form. I understand that the information will be processed according to the Protection of Personal Information Act, 2013 and Momentum Corporate's strict policies on protecting the confidentiality of my personal information.

I agree that Momentum Corporate may use my personal information to provide and administer retirement fund investment and insurance products and share my personal information with Momentum Corporate's partners and contracted service providers, who are legally bound to protect the information.

[Click here to read Momentum's privacy notice.](#)

Signed at

Signature

Date

D	D	-	M	M	-	2	0	Y	Y
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Options to sign the form:

1. Print out the form, sign and scan it and send it back via email to momentumcorporateclient@momentum.co.za.
2. Place your scanned signature in the signature block.
 - Store your scanned signature in a safe place on your computer.
 - Select the 'comments' tab from your menu in Adobe.
 - Select the 'add stamp' icon.
 - Select custom stamps.
 - Create custom stamps.
 - You can now browse and upload your signature to save it as a custom stamp under 'sign here' in Adobe.
 - You can now go back to your 'stamps' icon and select 'sign here' and select your saved signature.
 - Place it in the document and save the document.

When you want to print the form to complete by hand you can turn off the field highlights by selecting the "highlight existing fields" on the top right-hand corner of your screen.