

**FundsAtWork
FlexiCovers**

Member number

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Before completing this form please make sure that:

- you have read your member guide;
- you have read your benefit statement and you know which benefits you have;
- you have made use of the calculator available on the website (<http://www.momentum.co.za/fundsatwork>); and

If you have any queries regarding FlexiCovers, you may contact the Client Contact Centre on 0860 65 75 85.

Please fill in this form in the fields provided. Use the tab key to move from one field to the next.

Section 1: Employer details

Employer's name

Employee number

Section 2: Member details

Title Initial/s First name

Surname

Date of birth - -

RSA ID Yes No ID/Passport number

Passport country of origin

Residential address

Postal Code

Postal address

Postal Code

Telephone - work Fax number

Telephone - home Cell number

Email address

Section 3: FlexiCovers group life cover (if applicable)

Please indicate the cover required:

Multiple of annual salary (e.g. 1,2, ...)

OR:

Amount R

The multiples of salary flexed can be in increments of 0.25, to a total of 12 times annual insurance salary. Fixed amounts of cover can be chosen only if fixed amount benefits apply to all the members in your employer's scheme.

Section 4: FlexiCovers spouse's and childrens' annuity (if applicable)

Please indicate the cover required:

Spouse . %

Child . % **subject to a maximum of 4 children**

The sum of the benefit for the spouse and the children cannot exceed 100% of your monthly salary. The percentages can vary in any combination, with the percentage for the spouse capped at a maximum of 66.67%.

Section 5: FlexiCovers permanent health insurance (if applicable)

Percentage of insurance salary . %

Flexing is in increments of 1%, between 25% and 75% of salary.

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Section 6: FlexiCovers lump sum disability (if applicable)

Please indicate the cover required:

Multiple of annual salary (e.g. 1,2, ...)

OR:

Amount

 R

The multiples of salary flexed can be in increments of 0.25, to a maximum of 8 times insurance salary. Fixed amounts of cover can be chosen only if fixed amount benefits apply to all the members in your employer's scheme.

Section 7: FlexiCovers Capital Income Provider (if applicable)

Please indicate the cover required:

Income benefit

 %

Flexing is in increments of 1%, between 25% and 75% of salary

AND

Lump sum benefit:

Multiple of annual salary (e.g. 1,2,)

OR

Amount

 R

The multiples of salary flexed can be in increments of 0.25, to a maximum of 8 times insurance salary. Fixed amounts of cover can be chosen only if fixed amount benefits apply to all the members in your employer's scheme.

Section 8: Declaration by member

I (full names)

hereby declare that:

- all particulars furnished in this form are true and correct;
- I understand the FlexiCovers that have been made available to me; and
- I am aware of the effect the change in FlexiCovers will have on my take-home pay.

Signed at

Member's signature

Date

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Fax this completed form to our Client Contact Centre on 012 675-3970. At the same time inform your employer of the change. You may also log on to our website at www.momentum.co.za/fundsatwork and make changes to your FlexiCovers electronically.

Notes:

1. FundsAtWork will not be liable for any losses you incur if the information you supply is unclear, illegible or incorrect in any way.
2. You may be requested to go for medical examinations.
3. A benefit will not be paid if death is a result of suicide or self inflicted injury within the first two years of selection of the flex cover over the default cover chosen by the employer.

Note

We recommend that you contact your financial adviser before you make any changes to your product option, benefits and beneficiaries.

When you sign this form by inserting a digital signature it confirms that the information provided is true and correct.

Options to sign the form:

1. Print out the form, sign and scan it and send it back via email to clientcontactcentre@momentum.co.za or fax it to +27 (0)12 675 3970.
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.