



## Change in banking details form

P.O. Box 1101, Florida Glen, 1708 Call 0860 002 108  
Fax (011) 758 7171 Email membermaint@bonitas.co.za

### Instructions

This form can be used for updates to your banking details.

Please attach the following documents to this form:

- A copy of your identity document or passport
- Proof of banking details i.e. a letter from your bank or latest statement

### Section 1: Membership details

Full name:	<input type="text"/>
Identity number:	<input type="text"/>
Membership number:	<input type="text"/>

### Section 2: Bank details

#### Use this account for contribution collections

Bank name:	<input type="text"/>
Branch code:	<input type="text"/>
Branch name:	<input type="text"/>
Name of account holder:	<input type="text"/>
Account number:	<input type="text"/>
Account type:	<input type="text"/>
Effective date:	<input type="text"/>

#### Use this account for refunds only

Bank name:	<input type="text"/>
Branch code:	<input type="text"/>
Branch name:	<input type="text"/>
Name of account holder:	<input type="text"/>
Account number:	<input type="text"/>
Account type:	<input type="text"/>
Effective date:	<input type="text"/>

Upon me being accepted as a member of Bonitas, I instruct Bonitas to collect my contributions by debit order using the information above. I understand that transfers cannot be done to and from credit card accounts. I also irrevocably authorise Bonitas to adjust any incorrect transactions and/or correct any electronic transfer or funds errors without prior notice. I, further, instruct Bonitas to deposit claims and savings refunds into my account using the details above.

Account holder's signature: \_\_\_\_\_

If the account holder's details differ from the main member, we require a letter from the account holder instructing and authorising Bonitas to collect contributions from their bank account. We will also require a copy of the account holder's identity document and a bank statement or a letter from the bank confirming the account holder's details.

### Section 3: Acknowledgement and declaration

1. I declare that the information contained in this application form is correct. I also declare that I have the permission of my dependants to disclose personal information about them to Bonitas and will provide written proof of this, if asked.
2. I authorise any persons, bodies or institutions that may hold retirement funds for my benefit, to deduct and pay to Bonitas all amounts that may become due and owing to Bonitas.
3. I agree that should Bonitas incur any legal costs or expenses to recover any contributions owed by me or any other amount due by me to Bonitas, for any reason; I shall be responsible for such costs and expenses on the attorney/client scale. I consent to my details being listed with a credit bureau should I default in the payment of my monthly contributions or in respect of any money owed to Bonitas.
4. I understand that it is my responsibility to ensure that the monthly contributions are received by Bonitas. I also understand that if any contributions are unpaid, it may result in me and my dependants being terminated from Bonitas until all arrear contributions have been settled. I also understand that should my membership be suspended or terminated, I will not be entitled to any benefits arising from my membership whatsoever.
5. I acknowledge that I have read and understood the content of this application form. I confirm that the content of this application form and the implications thereof have been read and explained to me if necessary.
6. I have read and understood these statements and my signature below confirms that I give permission to Bonitas to update my banking details.

Signature of main member: \_\_\_\_\_

Date: \_\_\_\_\_