

VERY IMPORTANT: Plan changes will not be accepted after the closing date

PLEASE NOTE:

1. You are allowed to move from one plan to another once a year - i.e. on 1 January each year
2. You retain your membership number as a member number for life. The new option does not mean a new membership number.

Completed forms and supporting documents may be emailed to:
Optionchange@sizwe.co.za or Faxes to 011 353 0267 (Both employer groups and direct paying members).

DECLARATION AND ACCEPTANCE OF RESPONSIBILITY

I understand that I must give written notice by 11 December of my intention to transfer to a new benefit plan in the following year, which becomes effective on the first day of January following submission of my plan selection.

I accept that I can only change options once a year and will remain on this option until 31 December of that year.

I understand and accept that the option change might affect my current benefits and I take responsibility for the consequences of any benefit changes as a result of option changes. I understand that I am responsible for payment in full of the monthly contributions on my new option.

Member's Signature: _____

Date:

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