

# SELFMED OPTION CHOICE FORM

	MEDXXI	SELSURE	MED ELITE	SELFMED 80%
	<i>from 1/1/2019</i>			
Principal Member	R 2,051	R 3,175	R 5,768	R 7,920
Adult Dependant	R 2,040	R 3,170	R 5,191	R 7,128
Minor Dependant	R 820	R 794	R 1,154	R 1,584
Mark here (X)				

Preferred inception date: 01/ \_\_\_\_\_

**NB:Your benefit start date may vary from your inception date.**

### Declaration for acceptance of waiting periods

I am aware that a 3-month general and/or a 12-month condition specific waiting period (nine months on existing pregnancy) may be imposed on my membership with effect from date of registration if:

- › I have not been on a previous scheme for more than 3-months prior to my application for membership
- › I was on a previous scheme for more than 3-months prior to my application for membership (12-month condition specific waiting period only).
- › I was on a previous scheme for 2 years or more and apply for membership within 3 months (3-month general waiting period only)

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

### Declaration for acceptance of late joiner penalty

I am aware that a penalty may be added to my monthly contributions and/or that of my dependants with effect from date of registration if I, and/or any of my dependants are aged 35 years or older at the time of application, and was/were not registered as a member or dependant on a registered medical scheme on 1 April 2001, and/or has/have been without medical cover for a period exceeding three consecutive months since 1 April 2001.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature