BMW Employees Medical Aid Society

Administered by Discovery Health

Contact us

Tel: 0860 002 107 • PO Box 652509 • Benmore, 2010 • www.bemas.co.za

Permission to change banking details

This is a form to change banking details

Who we are

The BMW Employees Medical Aid Society (referred to as 'BEMAS'), registration number 1526, is a non-profit organisation, registered with the Council for Medical Schemes.

Discovery Health (Pty) Ltd (referred to as 'the administrator') is a separate company and an authorised financial services provider (registration number 1997/013480/07). We take care of the administration of your membership for BEMAS.

How to complete this form

1. Please use one letter per block, complete in black ink and print clearly.
2. To avoid administration delays, please ensure this application is completed in full.
3. You need to submit the following with this form:
   - Copy of ID
   - Bank statement/letter of confirmation from the bank not older than 3 months.
4. Please fax this completed and signed form with any supporting documentation to 011 539 2766 or email it to **bmwadmin@discovery.co.za**
5. When you sign this application, you confirm that you have read and understood the rules for membership and agree to them.
6. Alternatively, you can update your bank details by visiting **www.bemas.co.za** if you are a registered web-user.

1. What would you like to change?

Debit order details ☐ Claim payment details ☐ Both ☐

2. Main member details

Membership number

Employee Number

ID number

3. New account details for Debit Orders

We will start using these banking details once they are loaded onto the system.

Please note that we cannot accept credit card details

Accountholder

Bank

Account number

Type of account Cheque ☐ Savings ☐

Branch number — — —

Branch name

4. New account details for Claims Payments

When should we start using the new banking details? 2 0 Y Y M M D D

As per debit order details ☐

Please note that we cannot accept credit card details.

Accountholder

Bank

Account number

Branch number — — —

Type of account Cheque ☐ Savings ☐

Branch name

4. New account details *(continued)*

Your banking details will only be changed if:

1. All the relevant fields on this request form have been filled in
2. The request has been signed by the main member
3. Documentation required in step 3 of "What you must do" accompanies this form.

I, _____ (first and last name), as the main member, give the Scheme permission to change my banking details.

Signed at (town or city) _____ on 2 0 Y Y M M D D

Signature of main member _____

Signature of accountholder _____

Please do not sign an incomplete application form.

If the accountholder differs from the main member, the Scheme and the administrator reserve the right to obtain bank confirmation.

The BMW Employees Medical Aid Society is a registered medical scheme with the Council for Medical Schemes (CMS). The CMS contact details are as follows: e-mail complaints@medicalschemes.com / Customer Care Centre: 0861 123 267 / website www.medicalschemes.com

BMW Employees Medical Aid Society. Registration number 1526. Administered by Discovery Health (Pty) Ltd, registration number 1997/013480/07, an authorised financial services provider.

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