	Broker	ap	pointm	ent	form
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Contact us

Tel: 0860 103 933 • PO Box 652509, Benmore 2010 • www.lahealth.co.za

The purpose of this form is to change the appointed broker on record. Only the appointed broker will have access to your LA Health information.

How to use this form

- 1. Please ensure that this form is completed in full.
- 2. Please complete the form in black ink, print clearly and write one letter per block.
- 3. If the spaces provided are not adequate, please attach a list with all relevant details.
- 4. Please email or fax completed form to us at commissions@discovery.co.za or 011 539 2550.

1. Member details

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