



National Fund for Municipal Workers
Change of Risk Cover Option – Category A
(For use by new and existing members)

SEND COMPLETED FORM TO E-MAIL: A011@nationalfund.co.za

The fund will not accept any *Change of Risk Cover Option* form, sent to an e-mail address other than the above.

APPLICANT INFORMATION

Membership number	<input type="text"/>
Surname	<input type="text"/>
Full names	<input type="text"/>
e-Mail address	<input type="text"/>
ID number <small>ATTACH COPY OF ID DOCUMENT</small>	<input type="text"/>
Telephone number – Mobile	<input type="text"/>
Telephone number – Office	<input type="text"/>
Telephone number – Home	<input type="text"/>
Home postal address	<input type="text"/>
Postal code	<input type="text"/>
Employer (MUNICIPALITY)	<input type="text"/>
Employee number (PAYSLIP NUMBER)	<input type="text"/>

RISK OPTION SELECTION

		NEW MEMBER	EXISTING MEMBER			
			CURRENT CATEGORY			
			A0	A1	A2	A3
CATEGORY		OPTIONS	OPTIONS			
A0	DEATH DISABILITY FUNERAL	No Cover No Cover YES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A1	DEATH DISABILITY FUNERAL	1 x Annual Salary 1 x Annual Salary YES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A2	DEATH DISABILITY FUNERAL	2 x Annual Salary 2 x Annual Salary YES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A3	DEATH DISABILITY FUNERAL	3 x Annual Salary 3 x Annual Salary YES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

RISK COVER DECREASES

- Only members of age 40 years and above may elect A0.
- Applications for a DECREASE in risk cover will only be processed and effective on 1 January and 1 July, with cut-off dates being 31 December and 30 June respectively. Applications received between these dates will be accumulated. The member will receive confirmation when his/her application has been received, and again when the request was successfully processed. The member will have no right to a claim if he/she cannot provide such acknowledgement of receipt/process from the fund.

RISK COVER INCREASES

- Only members in Category A0 are allowed to increase their risk cover to category A1, provided they provide proof of good health (at own cost).

MEMBER

NFMW OFFICIAL

Signature _____ Date

Signature _____ Date

National Fund for Municipal Workers CONTACT DETAILS

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