

<b>Particulars of Business:</b>											
Registered Name:											
Trading Name:											
VAT Number:				Compensation Fund Employer Number:				PSIRA Employer Number:			
Business Physical Address:											
										Code:	
Business Postal Address:											
										Code:	
Business Contact Number:						Fax Number:					
Company E-mail Address:										Number of Employees:	
Company Branches: <input type="checkbox"/> Gauteng <input type="checkbox"/> Mpumalanga <input type="checkbox"/> KwaZulu-Natal <input type="checkbox"/> North West <input type="checkbox"/> Free State <input type="checkbox"/> Limpopo <input type="checkbox"/> Western Cape <input type="checkbox"/> Eastern Cape <input type="checkbox"/> Northern Cape											
<b>Name of Finance Contact:</b>											
Contact Number:						Email Address:					
<b>Name of Payroll Contact:</b>											
Contact Number:						Email Address:					
<b>Name of HR Contact:</b>											
Contact Number:						Email Address:					

<b>Scheme Details:</b>											
Inception Date: D D M M Y Y Y Y										Expected Member Count:	

<b>Payment Details:</b>											
Account Name:						Bank Name:					
Account Number:						Account Type:				Branch Code:	
Monthly Payment/Deduction Date: <input type="checkbox"/> 1st <input type="checkbox"/> 7th <input type="checkbox"/> 15th <input type="checkbox"/> 20th <input type="checkbox"/> 25th						First Payment:					

<b>Branch Locations:</b>											
	Branch Name:										Contact Person:
1st Branch											
2nd Branch											
3rd Branch											
4th Branch											
5th Branch											
6th Branch											
7th Branch											
8th Branch											
9th Branch											
10th Branch											

<b>Disclaimer:</b>											
The deduction of premiums from the employee's salary and subsequent payment of the total lump sum to Affinity Health is the responsibility of the Employer. It is important to note that the continuation of services is subject to a the monthly premium and your employees will enjoy benefits for as long as the premiums are received. Successful payments will secure cover and services for that month and payment schedules are calculated on a month to month basis. Payment is due by no later than the 7th of each month.											

Company Representative Signature										Date	
										D D M M Y Y Y Y	