

CONTINUOUS MEMBERSHIP AFTER RESIGNATION VOORTGESETTE LIDMAATSKAP NA BEDANKING

Surname
Van

First names
Voorname

Membership number
Lidmaatskapnommer

I herewith request to remain a member of TeleMed effective
Ek versoek hiermee om as lid van TeleMed aan te bly effektief

(Abovementioned date has to be continuous with your resignation date / Bogenoemde datum moet aaneenlopend wees met jou bedankingsdatum)

I wish to be registered with benefits offered by
Ek wil graag geregistreer word met die voordele van

Bronze
Brons

Silver
Silwer

Gold
Goud

Gold Select
Goud Select

Platinum

(Mark the option that is applicable - should you choose the Bronze or Silver option please attached documentary proof regarding monthly income / Merk die opsie wat van toepassing is - indien jy die Brons- of Silwersie kies heg asseblief skriftelike bewys van inkomste aan)

I am aware that my contributions will increase to
Ek is bewus van die feit dat my bydrae verhoog na

per month
per maand

Postal address
Posadres

Telephone number (W)
Telefoonnommer (W)

Telephone number (H)
Telefoonnommer (H)

Cellular number
Selfoonnommer

Email
Epos

Signature / Handtekening

Date / Datum