



DEBIT ORDER

I/We, the undersigned, request Bankmed Namibia to arrange with my/our band/building society and Multi-Data for the premiums/balance premiums payable in terms of the conditions of the membership (as they may be amended from time to time) to be drawn against my/our banking account (where it may be) in accordance with the debit order system.

First collection date _____

Membership Number

Premium _____ Payable in advance monthly _____

Name of account from which amounts are to be collected, as the name appears in the books of the bank/building society:

If it is the account of a company, institution etc., state name of account:

If it is the account of a person, state:

Surname Initials

Date of birth Identity number of payer

Address of payer _____

Name of bank/building society (If it is an agency, state the branch under which it falls) _____

Address of bank/building society _____

Is the principal member also the payer? Yes No

Principal member (if not the payer) _____

Surname _____

First name and other initials _____

Date of birth

Type of account Current Savings

FOR OFFICE USE

4-digit banking code

8-digit banking code on cheque

Payer's banking account number

Signature of payer _____
(If payer is a company, an authorized official has to assign the company stamp.)

Date _____

For use of the Bank/Building Society
Identification of account as it appears in the books of the bank/building society

Bank/Building Society stamp

FOR OFFICE USE

Particulars of cash payments, with debit order (specify membership number(s), amounts, dates and cash statements)
