

Employer application to join the Discovery Health Medical Scheme in 2016



Thank you for deciding to apply to join the Discovery Health Medical Scheme. This application contains some rules for membership. Please make sure you read and understand these rules.

Who we are

The Discovery Health Medical Scheme (referred to as 'the Scheme'), registration number 1125, is the medical scheme that you are applying to become a member of. This is a non-profit organisation, registered with the Council for Medical Schemes.

Discovery Health (Pty) Ltd (referred to as 'the administrator') is a separate company and an authorised financial services provider (registration number 1997/013480/07). We take care of the administration of your membership for the Scheme.

What you must do

- Fill in the form in black ink, using one letter per block. Please print clearly.
- Read and understand the rules for membership (section 9).
- Sign section 6, 8 and 9.
- Email the completed and signed form to application@discovery.co.za or fax it to **011 539 3000**.

When you sign this application, you confirm that you have read and understood the rules for membership and agree to them.

1. About your organisation

When do you want your cover to start?

Name of employer

Registration number VAT number

Employer number Branch number

Legal entity, for example (Pty) Ltd or partnership

Postal address (Post collected from post box, suite or private bag)

Suite Postnet Suite Number

PO Box Private Bag Box number

Suburb Code

If your post is delivered to your street address, please complete these details under physical address.

Physical address

Suite/Unit number Complex name

Street number Street name

Suburb Code

In what industry do you operate? Please tick the relevant block below:

Mining and mining resources Financial services Retail Hotel/leisure/entertainment IT Manufacturing

Construction/building Professional services Religious organisation Education

Other (please specify)

Workman's compensation (COID) registration number / /

2. Your organisation's contact people

2.1 Executive (Financial director, Senior director, Managing director)

Title Initials Surname

First name(s) (as per identity document)

ID or passport number Country of issue

Date of birth Employee number

Telephone (W)

Cellphone

Email

Preferred language English Afrikaans

9. Rules for membership (continued)

9.2 Giving and getting information

You must give us true, correct and complete information

For the Scheme to consider the application for your employees' membership, the Scheme must learn more about you, your employees and those they join with. Information about you, your employees and those they join with must be true, correct and complete. This includes the details you give in this document and future information given to us by anyone in your organisation or a financial adviser acting for you. Even if you or your employees do not consider a medical condition, symptom or illness to be relevant to this application, it is important to tell the Scheme about it during the application process.

The Scheme may get information directly from your employees

We and the Scheme can get information direct from your employees and those they join with who are over the age of 18. This includes asking for medical tests, either before or during their membership with the Scheme.

Tell the Scheme about changes right away

If any of the information you gave as part of this application changes between the date you sign this document and the date cover starts, you or your employee concerned must tell us or the Scheme in writing what the changes are. Any changes may influence the terms the Scheme offers you. The Scheme needs advance notice of any administrative changes such as cancellation of membership as we do not accept backdated changes.

The Scheme may cancel membership if information is not true, correct and complete

The Scheme may cancel the membership of any of your employees immediately, if you, your employees or those they apply for:

- don't give us information that later turns out to be relevant to this application
- give us any information that is not true, correct and complete
- do not tell us about any health changes or other relevant changes between the date you sign this document and the date cover starts.

9.3 Payment of contributions

You must pay monthly contributions for your employees by the payment due date. If you do not pay in time, you must pay within three days of the payment due date. If you do not pay within three days, the Scheme may suspend or cancel the memberships of your employees and those they join with. During any period of suspension, the Scheme will not be responsible for paying medical expenses.

9.4 Conditions for cover

Cover starts on formal acceptance

Cover for each employee starts on the date specified on the notice of acceptance the Scheme sends to them.

Applicants must be employed by you

Applicants for membership must be employed by you on the date that cover starts. If an applicant is not employed by you on the date that this contract starts, the Scheme will not give notice of acceptance to this applicant until the applicant is employed.

Resigning from current medical schemes when accepted

It is illegal to be a member of more than one medical scheme at the same time. Your employees and those they join with must resign from their current medical schemes when they receive notice of acceptance from the Scheme.

9.5 Tell us if an employee leaves

We need advance notice of any administrative changes such as cancellation of membership, as we do not accept backdated changes. We will then adjust contributions you must pay.

You agree that you are responsible for any losses that the Scheme may suffer because you did not give us this information.

When you sign this application, you confirm that you have read and understood the rules for membership and you agree that you and your employees will be bound by them.

Date

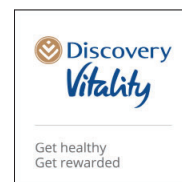
 Please do not sign incomplete forms.

Authorised signatory(ies)
On behalf of the employer
and employees, duly authorised

Names

Designations

Employer application for Vitality or KeyFIT



Contact us

Tel: 0860 99 88 77, PO Box 653574, Benmore 2010, www.discovery.co.za

Please complete this form and submit it to us by email to application@discovery.co.za or by fax to (011) 539 3000.

1. About Vitality

Vitality will help your employees to get healthier by giving them the knowledge, tools and motivation to improve their health. Apart from the fact that a healthy life is generally more rewarding, it's been clinically proven that Vitality members have a lower healthcare cost than non-Vitality members. So, get your employees to join today and start the journey to a healthier company.

Please make sure that you sign this application

Name of employer	
Employer representative's name and surname	
Employer representative's ID number	

2. Vitality payment and banking details

Select payment method.

- The employer will facilitate payment of Vitality and/or KeyFIT e.g. employer subsidises Vitality or deducts the Vitality premium via their payroll
Note: The banking details used to pay for Vitality will be as per those for the Health scheme
or
 Vitality and/or KeyFIT will be paid for by the individual employees.

3. Your organisation's Vitality or KeyFIT details

- Vitality and/or KeyFIT* will be paid for all employees.
 Vitality and/or KeyFIT* individually selected by each employee.
Notification: Email Fax

*Only employees on a KeyCare Plan can join KeyFit on its own (without Vitality).

4. Vitality contributions for 2016

	Vitality	KeyFIT	Vitality and KeyFIT member
Member	R199	R43	R215
Member + spouse or dependant	R239	R53	R259
Member + 2 or more dependants	R269	R65	R299

5. Vitality rules for membership

Discovery Vitality and KeyFIT are separate from the Scheme and administrator

Discovery Vitality is a separate company from Discovery Health (Pty) Ltd ('the administrator') and the Discovery Health Medical Scheme (referred to as 'the Scheme'). It is formally registered under the name Discovery Vitality (Pty) Ltd, (registration number 1999/007736/07) and takes care of the administration of the Vitality and KeyFIT programmes ('Discovery Vitality'), DiscoveryCard and the DiscoveryCard loyalty programme.

Rules of the Vitality programme

A full set of rules is available on www.discovery.co.za or you can call Discovery Vitality on 0860 99 88 77. In the event of a conflict between what is set out here, on our website and the rules of Vitality, the rules will always apply.

Your contributions to Discovery Vitality are separate

The contributions you pay are for Discovery Vitality and are not part of the contributions you pay to the Scheme.

Cancellation of Vitality membership

Please give notice on the first day of the month if you wish to cancel your Vitality membership in that month. Otherwise, your membership will only end on the last day of the next month. Your employees must be a member of Vitality at the time of the *billing cycle (not the time of the transaction) in order to be eligible for rewards.

*Billing Cycle refers to the date decided by Discovery Vitality, on which your Vitality benefits are calculated on a monthly basis.

When you sign this application to join Vitality, you confirm that you have read and understood the rules for membership and you agree that you and those you apply for will be bound by them.

Signed at (town or city) on 2 0 Y Y M M D D

Signature of main applicant

The main applicant must sign and date any changes