## Option change form 2020



**Contact details** 

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## Who we are

LA Health Medical Scheme (referred to as 'the Scheme'), registration number 1145, is the medical scheme that you are applying to become a member of. This is a not-for-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

Please return the co	mpieted form to your emp	ployer, pension fund or broker	to make sure your r	equest is captured.	
1. Member's d	etails				
Member name Telephone (H) Cellphone Email				(W) Fax	
Member number	Payroll number Payroll number				
Please complete if y	y y M M D D ou have selected the LA Ke	KeyPlus LA Active LeyPlus Benefit Option.	LA Focus 🗌	LA Core ☐ LA Co	omprehensive 🗌
LA KeyPlus Primary	1	I			
	Name	General practitioner (GP)	Practice number	Second GP name	Practice number
Main applicant					
Spouse or partner					
Dependant one					
Dependant two					
Dependant three					
	from where you work or you second GP if this applies	ou often need to work in differ to you.	ent towns, you may	need a second GP.	
Reason for change					
Member signature				Date Y Y	Y Y M M D D
	Please do not sign an inc	omplete application form.			
Please note: LA Hea unless you are a deb		ot accept any changes to your r	nembership withou	t approval from your Municipa	al Salary Office,
2. Employer's	or pension fund appro	oval			
Name Phone		Appro	oved Yes N	0 🗆	
Signature			Employ	er stamp	

For further details fax 011 539 7235 or email lahealthadmin@discovery.co.za