Discovery Life Funeral Plan Policy cancellation form



Contact us

Tel: 0860 372 030 Email: FuneralPlan@discovery.co.za www.discovery.co.za

How to complete this form

- Please complete in black ink.
- Please print clearly.

Signature of policy owner

- Write one letter per block.
- Please email the form to FuneralPlan@discovery.co.za once completed.

Notes

- 1. This form must be completed when requesting a cancellation to an existing Discovery Life Funeral Plan
- 2. The policy number must be completed.
- We will not make any changes if the policy owner has not signed this form.

3. We will not make any changes if the policy owner has not signed this form.																													
1. Policy owner deta	ils																												
Policy number																			[I I		I I	I I]
Policy owner first name																								\mathbb{I}	I		\Box]
Policy owner surname																										I]
Title					Se	х	M	F																					
ID number																													
2. Policy owner contact details																													
Cellphone number																													
Alternative cellphone number																													
Email address																													
Residential address																													
Unit number																													
Street name																													
Suburb																													
City/Town																													
Province																					Ро	sta	l co	de					
1. I hereby confirm that I am the policy owner of the abovementioned funeral policy. I hereby instruct Discovery Life to cancel the policy.																													
2. I understand that once your cancellation instruction is processed, the cancelled policy may not be reinstated.																													
3. No further benefits will be payable on the policy after the effective date of cancellation.																													
4. Policy cancellations are subject to a one month notice period.																													
Signature at (town or city)															1														