



Ordel Brokers cc

Corp. Reg. No. CK 88/31282/23
Authorised Financial Service Provider No.: 16440

BROKER HOUSE
244 Cape Road Greenacres
Port Elizabeth 6045

P.O. Box 27134 Greenacres
Port Elizabeth 6057

TEL: (041) 363 1188
FAX: 086 435 5803

E-mail:
ordel@ordelbrokerscc.co.za

INSURANCE INVESTMENT & HEALTHCARE BROKERS

MEDICAL AID – IDENTIFYING YOUR NEEDS

FULL NAME:	ID NUMBER:
------------	------------

CURRENT MEDICAL AID:	PLAN:	START DATE:	NONE
----------------------	-------	-------------	------

DEPENDANTS:	DATE OF BIRTH:
1.	
2.	
3.	

NEEDS:	HOSPITAL:	DAY TO DAY:	BOTH:
--------	-----------	-------------	-------

CHRONIC CONDITION/MEDICATION (IF ANY)

MONTHLY INCOME R_____

AFFORDIBILITY I can afford a premium that ranges between R_____ & R_____

Or

I can only afford basic cover at the lowest possible premium Yes No