We're about you

# Cancel debit order request

tel 061 285 5400
fax 061 230 465
email members@nhp.com.na
website www.nhp.com.na
Erf 1319, Grove Street
Kleine Kuppe, Windhoek
PO Box 23064, Windhoek, Namibia
Reg No: MOHSS 003

**Please note** In order for the administrator to deliver efficient service to you, it is important that you provide and complete all information as required. Print clearly using **capital** letters. Only **one** character per block. Leave open **one** block between words. Mark with an **X** where necessary.

## Particulars of principal member (must be completed)

Membership number

Benefit option Select a benefit

Title -

Initials

First name(s)

Surname

Tel (H)

Tel (W)

Cell

Fax

Email Address

**Attach a copy of a bank statement/letter from the bank/bank letterhead or bank identification purposes.**

## Banking details

Bank name

Branch name

Branch code

Account number

Type of account

Name of account holder

I instruct the administrator on behalf of NHP, to remove the above banking details via the Electropay system, using the information provided. I also irrevocably authorise the administrator to adjust any incorrect transactions and/or correct any electronic transfer of fund errors without prior notice.

I agree that I am not entitled to recover any amount drawn from my account should my bank/building society repay such amount to me, I will refund it to NHP immediately. I undertake to notify NHP of any changes in respect of my address or bank/building society.

Signature of account holder

Date

Compulsory
Bank stamp