

Bank details for contribution refunds – Student checklist

2021

☐
Please refund to my local South African bank account

☐ I have completed Section 1 and 2
 ☐ I have attached my email requesting the refund and the reason for the refund
 ☐ My studies have been terminated, I have attached a letter from my university, OR
 ☐ My visa has been denied, I have attached an official confirmation from the embassy
 ☐ I have attached a copy of my passport
 ☐ I have attached a stamped letter from my bank confirming my bank account

☐
Please refund to a third party's (someone else) South African bank account

☐ I have completed Section 1, 3 and 4
 ☐ I have attached my email requesting the refund and the reason for the refund
 ☐ My studies have been terminated, I have attached a letter from my university, OR
 ☐ My visa has been denied, I have attached an official confirmation from the embassy
 ☐ I have attached a copy of my passport
 ☐ I have attached a copy of the account holder's ID or passport
 ☐ I have attached a letter from the third party's bank confirming the bank account

☐
Please refund to my South African student account (University/Institution/Sponsor)

☐ I have completed Section 1
 ☐ I have attached my email requesting the refund to be paid to my student account
 ☐ My studies have been terminated, I have attached a letter from my university, OR
 ☐ My visa has been denied, I have attached an official confirmation from the embassy
 ☐ I have attached a copy of my passport
 ☐ I have attached a copy of the proof of payment

☐
Please refund to my own foreign bank account

☐ I have completed Section 1 and 2
 ☐ I have attached my email requesting the refund and the reason for the refund
 ☐ My studies have been terminated, I have attached a letter from my university, OR
 ☐ My visa has been denied, I have attached an official confirmation from the embassy
 ☐ I have attached a copy of my passport
 ☐ I have attached a stamped letter from my bank confirming my bank account, including SWIFT code and physical address of account holder and bank
 ☐ I have attached proof of payment confirming that the payment was made from a foreign account

☐
Please refund to a third party's (someone else) foreign bank account held outside South Africa

☐ I have completed Section 1, 3 and 4
 ☐ I have attached my email requesting the refund and the reason for the refund
 ☐ My studies have been terminated, I have attached a letter from my university, OR
 ☐ My visa has been denied, I have attached an official confirmation from the embassy
 ☐ I have attached a copy of my passport
 ☐ I have attached a copy of the account holder's passport
 ☐ I have attached a letter from the third party's bank confirming the bank account details including SWIFT code and physical address of account holder and bank
 ☐ I have attached proof of payment confirming that the payment was made from a foreign account

Important notes:

- Please note that the principal member is the owner of the medical cover and needs to complete and sign sections 2 and 3 on this refund form (if applicable).

1: Principal member details

Membership number	9	1	7	1	3	6	9	1	0			
Title	Ms			Initials	A	P	D	S	First name	ANA PAULA DA SILVA		
Surname	INACIO											
Contact number	214196356av@gmail.com						Student number	kwcct210001209333				
Email address												

2: Principal member's banking details

(Please do not provide credit card details).

Name of account holder															
Name of bank															
Account number															
Account type	Current/Cheque						Savings			Transmission					
Branch code							Branch name								
Signature of principal member							Date	D	D	M	M	Y	Y	Y	Y

3: Refund contributions to another person/third party

I (name and surname),															
Membership number															
hereby give permission to transfer the funds into the bank details provided in Section 4 below.															
Contact number															
Email address															
Signed at															
Signature of principal member							Date	D	D	M	M	Y	Y	Y	Y

4: Banking details of third party

(Please do not provide credit card details).

Name of account holder	Ludmil Paulo Samuel Avelino													
Name of bank	Nedbank													
Account number	1083653202													
Account type	Current/Cheque						XX	Savings			Transmission			
Branch code	198765									Branch name				
Signature of account holder	Ludmil Paulo						Date	3	0	9	2	0	2	1