



Termination letter - Main member

To whom it may concern

Membership department

Membership no

Date

Persal/employee/pension no

Dear Sir/Madam

Termination of membership of main member

I,

the undersigned member of

Medical Scheme, membership no , hereby terminate my membership of the Scheme with

effect from Date

Reason for termination

Please advise Persal timeously of the termination of my membership with the Scheme.

Please furnish me with a membership certificate that will serve as proof of the termination at the following address:

Postal address

Code

Fax no ()

Email address

Yours faithfully

Full name _____

Signature _____

Date