

Consent form

Authorising GEMS to disclose personal information to a third party



Purpose of this form: Third party consent is when you consent to give another person or entity (referred to as the “third party”) access to your personal information with the Scheme. This consent will allow the nominated person(s) access to the membership profile for either a limited or indefinite period. The request will be supported by a completed and signed consent form that is submitted by the principal member.

An Application Programming Interface (API) enables all GEMS-contracted service providers to access the third-party consent form in real-time, in order to improve operational efficiency when assisting our members.

Please submit the completed and signed form via email to enquiries@gems.gov.za or fax to 0861 00 4367.

Section 1: Personal details

Membership No.	<input type="text"/>
Title	Mr <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Initials <input type="text"/>
First Name	<input type="text"/>
Surname	<input type="text"/>
ID/Passport No.	<input type="text"/> Date of birth <input type="text"/>
Tel No.	<input type="text"/> Cell No. <input type="text"/>
Email	<input type="text"/>

Section 2: To whom the information may be supplied

Title	Mr <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Initials <input type="text"/>
First Name	<input type="text"/>
Surname	<input type="text"/>
ID/Passport No.	<input type="text"/> Date of birth <input type="text"/>
Tel No. Work	<input type="text"/> Cell No. <input type="text"/>
Fax No.	<input type="text"/>
Email	<input type="text"/>

Section 3: Consent

I, the undersigned hereby:

1. authorise GEMS to disclose the above information to the party(s) identified above;
2. agree that GEMS shall not be held liable for any loss or damage whatsoever, including direct, indirect and consequential, that may arise from the disclosure of any information pursuant to this consent;
3. agree that once consent is provided, any information held by GEMS may be provided to the identified party;
4. acknowledge that this consent will continue in force until expressly withdrawn by me in writing, even if I change practitioner/employer/broker.

Signature of member/ Authorised signatory _____

Date