

APPLICATION FOR TERMINATION / PAID-UP FOR ELDERSHIELD SUPPLEMENT / GREAT CARESHIELD

A DETAILS OF POLICY AND POLICYHOLDER				
Plan Type		ElderShield Supplement		GREAT CareShield
Policy No.				
Full Name of Policyholder				
NRIC No.				
Email Address				
Contact No.		Mobile: Home:		
В	INSTRUCTIONS TO TER	TIONS TO TERMINATE / CONVERT TO PAID-UP		
 Notes The policy will be cancelled with effect from the next renewal date and there is no refund of premium. If the cancellation is within the 60-day Freelook period from the policy commencement date, full refund of premiums will be made. Your Supplementary Plan(s) (if any) will be cancelled automatically upon the cancellation of your basic ElderShield / CareShield Life. If you wish to reinstate back to full coverage from paid-up or to rejoin the scheme, you will need to make a health declaration, subject to approval of underwriting. 				
Please tick one of the boxes below: I wish to convert the policy(ies) indicated in Section A to paid-up (Not Applicable to ElderShield ValuePlus) I wish to cancel the policy(ies) indicated in Section A Please tick the box below if you wish to receive your refund of premiums, if any, via PayNow (if the payments were previously made by cash), otherwise a cheque will be issued to you for such payments: Yes, I would like to receive the payment via PayNow. I confirm that I have registered with PayNow and I have linked my Singapore NRIC to my bank account ("PayNow Account") whereby I am the legal and beneficial owner of the PayNow Account. I hereby authorise and instruct The Great Eastern Life Assurance Company Limited to deposit the payment that is payable to me into my PayNow Account as well as to verify my PayNow Account with the respective Bank (where necessary). In the event that the PayNow transaction is unsuccessful, I agree and acknowledge that a cheque for the payment will be issued to me.				
Signature of Policyholder		Date		