

DIRECT CREDIT FORM



4 REASONS TO COMPLETE THIS DIRECT CREDIT FORM

1. Your payment is received more promptly.
2. Your payment is settled directly into your bank account.
3. You do not need to queue up at the bank.
4. You will be immediately notified that payment is transferred by SMS or Email.

4 RAĠUNIJET BIEX TIMLA' L-FORMOLA TAL-KREDITU DIRETT

1. Il-ħlas tiegħek jasal aktar fil-pront.
2. Il-ħlas isir direttament fil-kont bankarju tiegħek.
3. Ma jkollokx għalfejn tistenna fil-kju tal-bank.
4. Tiġi avżat immedjatament, permezz ta' sms jew Email, li t-trasferiment tal-ħlas ikun seħħ.

WITH YOU THROUGH LIFE

 **21 342 342**

 **bupa.com.mt**

DIRECT CREDIT FORM

Payment by electronic funds transfer to a bank account

- Kindly complete all details in each section in block letters and contact our Bupa Malta Call Centre on 21 342 342 for any queries.
- All payments in respect of claims for treatment by dependants registered under the nominated membership number will be credited to the selected bank account.
- Please ignore this form if you have already completed and submitted it to Bupa Malta.

Principal member's personal details	Membership number	<input type="text"/>		
	Name	<input type="text"/>	Surname	<input type="text"/>
	ID number	<input type="text"/>	Telephone	<input type="text"/>
	Email	<input type="text"/>	Mobile	<input type="text"/>

Bank details	Bank name	<input type="checkbox"/> APS	<input type="checkbox"/> Banif	<input type="checkbox"/> BOV	<input type="checkbox"/> HSBC	<input type="checkbox"/> Lombard
		<input type="checkbox"/> Other	<input type="text"/>	(Tick one only)	<input type="text"/>	
	Account holder's name	<input type="text"/>				
	IBAN	<input type="text"/>				
	BIC code	<input type="text"/>				
Account holder's signature	<input type="text"/>			ID number	<input type="text"/>	

Notification method	Preferred payment details notification method	<input type="checkbox"/> Email	<input type="checkbox"/> SMS	(Tick one only)
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Principal member's signature	Principal member's signature	<input type="text"/>	Date	<input type="text"/>
	<input type="checkbox"/> Please tick this box should you not want to receive any promotional material and/or information from GlobalCapital Health Insurance Agency Limited or any other subsidiaries of GlobalCapital p.l.c.			

BDC1013

GlobalCapital Health Insurance Agency Limited (GCHIA) acts as a branch for Bupa Insurance Limited, which has passported its services through the European Passport Rights for Insurance and Reinsurance Undertakings Regulations. GCHIA is registered as an insurance agent and is regulated by the Malta Financial Services Authority. Registered office: GlobalCapital Health Insurance Agency Limited, Testaferrata Street, Ta' Xbiex XBX 1403, Malta. Company Registration No. C6393.