

# TURNBERRY UPDATE OF INFORMATION FORM 2026

**Insurer:**  
Lombard Insurance Company Limited  
(Reg. No. 1990/001253/06) FSP no. 1596

**Risk and Underwriting Managers:**  
Turnberry Management Risk Solutions (Pty) Ltd  
(Reg no : 2007/026488/07) FSP no. 36571

Broker Name:

Broker Code:

FOR OFFICE  
USE ONLY

Application No.	<input type="text"/>	Client No.	<input type="text"/>
Policy No.	<input type="text"/>	Debtor No.	<input type="text"/>

Tel: 011 677 9891 | Fax: 086 676 0777 | Email: newbusiness@turnberry.co.za | Address: 4 Osborne Lane, Bedfordview, 2007

## A. DETAILS OF PRINCIPAL INSURED PERSON

Title:  First Name:  Surname:

ID Number:  Cellphone No.

Home Tel No.  Work Tel No.

Residential or Physical Addresses:

Postal Addresses:

Email:  Medical Scheme:

Medical Scheme No:  Option:  Date Membership Commenced:

In the event of the death of the Principal Insured person in respect of the Critical Illness Benefit or Personal Accident Benefit

Beneficiary Name:  Beneficiary ID:  Relationship:

## B. DEPENDANT DETAILS

Spouse/Partner and children up to the age of 26 years who are registered on the Principal Insured person or Spouse/Partner's Medical Scheme may be added to the Policy at no additional cost

Name of Dependant		Identity Number (Date of Birth if no ID No)	Gender M/F	Relationship to Policyholder
Surname	First Name			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## C. EXTENDED FAMILY COVER

Other Dependants/Extended Family registered on the Principal Insured person or Spouse/Partner's Medical Scheme may be added to the Policy for an additional premium, as detailed below. New dependants added are underwritten and subject to Waiting Periods. PLEASE NOTE NO EXTENDED FAMILY FOR THE DYNAMIC OPTION.

Product	Ages 26 - 64 (incl)		Ages 65 - 79 (incl)		Ages 80+	
	Rate	Number	Rate	Number	Rate	Number
PREMIER	R189	<input type="text"/>	R613	<input type="text"/>	R781	<input type="text"/>
OPTIMAL	R178	<input type="text"/>	R500	<input type="text"/>	R639	<input type="text"/>
SYNERGY	R176	<input type="text"/>	R495	<input type="text"/>	R632	<input type="text"/>
LAUNCH	R44	<input type="text"/>	R76	<input type="text"/>	R115	<input type="text"/>
MED-EXTEND	R163	<input type="text"/>	R616	<input type="text"/>	R787	<input type="text"/>

## D. CONFIRMING UPDATE

Confirming update

Signature:  Date: