

TSC CHANGE OF DEPENDENT FORMMember Name (*as it appears on ID*)

TSC Number:

ID No:

Change Dependent From:

To:

Reason for changing:

Signed:

Date:

Authorised By:

Designation:

Signed:

Date:

Stamp:

Documents attached (*indicate name as it appears on the document*)

Birth certificate

Marriage Certificate.....

Death certificate.....

Divorce Certificate/chief's letter

Risk. Reinsurance. People.