

# Official Enrollment Form for Premium HealthCare Plus Plan



Please send me my **PREMIUM HEALTHCARE PLUS PLAN** policy. I understand this not obligate me in any way and that I will have the opportunity to inspect my policy for up to 10 days before i accept it. I understand that the insurance will take effect when my policy is issued and I have paid my first premium during my lifetime and good health.

## Please Print (Full Name)

Mr.  Mrs.  Ms. \_\_\_\_\_  
First Name M.I. Last Name

Address \_\_\_\_\_

\_\_\_\_\_ Zip Code \_\_\_\_\_ Res./Off.No. \_\_\_\_\_

Mobile No. \_\_\_\_\_ E-mail Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_  Male  Female

Place of Birth \_\_\_\_\_

Occupation / Profession \_\_\_\_\_

Source of funds \_\_\_\_\_

TIN \_\_\_\_\_ GSIS \_\_\_\_\_ SSS Number \_\_\_\_\_

## Please check the plan you require (check one box only):

Plan 500  Plan 1000  Plan 2000  Plan 3000

## For Lifeline Rescue's EQRP, I prefer to protect:

My whole household for 1 year for only P700

Applicant's  
Signature ✓

\_\_\_\_\_ Date \_\_\_\_\_

SIGN-DO NOT PRINT

## Credit Card Authorization (If paying via credit card):

I authorize Paramount Life to charge my premiums to my credit card

American Express  Bankard / JCB  Diners  Any Visa or Mastercard

Cardholder's Name \_\_\_\_\_

Card Number \_\_\_\_\_ Tel No./Mobile No. \_\_\_\_\_

Expiry Date \_\_\_\_\_ Amount \_\_\_\_\_

I hereby understand and agree that should my Credit Card be refused by the Credit Card Company for whatever reason, failing to meet my financial obligation, this premium payment arrangement shall be immediately revoked/cancelled even without prior notice to me. I further agree that Paramount Life shall not be held liable in case of termination of the Policy as a result of such revocation/cancellation.

Cardholder's  
Signature ✓

\_\_\_\_\_ Date \_\_\_\_\_

(SIGN - DO NOT PRINT)

**PLEASE INCLUDE YOUR SIGNATURE AND YOUR BIRTHDATE.**

**Complete and mail • fax • e-mail this form today!**



**PARAMOUNT  
LIFE & GENERAL  
INSURANCE  
CORPORATION**

**Paramount Life & Gen,  
Madaling kausap.**  
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