

To whom it may concern

Re: International Travel Benefit Notification

Good day

I hereby wish inform my medical scheme that I am traveling overseas from

_____ to _____

I will be travelling alone:

I will be travelling with my dependants:

1. _____
2. _____
3. _____
4. _____
5. _____

Countries I am visiting:

1. _____
2. _____
3. _____
4. _____
5. _____

I require the following forms:

Shengen

Non-Shengan

Both

Kind Regards

Title _____

Medical Scheme Number _____

ID or Passport Number _____

Signature _____