



## SECTION 2

## NOMINATED GP DETAILS

If you have selected flexiFED 1, flexiFED 1<sup>Elect</sup>, flexiFED 2, flexiFED 2<sup>GRID</sup>, flexiFED 2<sup>Elect</sup>, flexiFED 3, flexiFED 3<sup>GRID</sup>, flexiFED 3<sup>Elect</sup>, flexiFED 4<sup>GRID</sup>, flexiFED 4<sup>Elect</sup> or myFED, you are required to nominate a GP (General Practitioner) from the Fedhealth network for yourself and your dependants. Please note that only visits to a nominated GP will be covered on these options. For a list of GP's on the Fedhealth network visit [www.fedhealth.co.za](http://www.fedhealth.co.za), click on member tools and you will find the GP locator button on the right hand side of the page. Alternatively you can phone the Customer Contact Centre on 0860 002 153 for more information.

	MEMBER / DEPENDANT NAME	NOMINATED GP DETAILS		
		NAME	PRACTICE NUMBER	CONTACT DETAILS
Principal member		1.	1.	1.
		2.	2.	2.
Dependant		1.	1.	1.
		2.	2.	2.
Dependant		1.	1.	1.
		2.	2.	2.
Dependant		1.	1.	1.
		2.	2.	2.
Dependant		1.	1.	1.
		2.	2.	2.
Dependant		1.	1.	1.
		2.	2.	2.
Dependant		1.	1.	1.
		2.	2.	2.

## SECTION 3

## INCOME VERIFICATION FOR THE MYFED OPTION

NB: Please tick appropriate box if an employer does not pay your contribution

## Highest household income per month

- R1 – R11 063  
 R11 064 – R15 617  
 R15 618 – R21 651  
 R21 652 – >

Income is considered as the income of the highest earner per household. Income to declare includes, but is not limited to, average monthly earnings over the last 12 months from guaranteed earnings, guaranteed allowances, company contributions and variable pay or commissions from employment (this includes self-employment and informal employment), pension and annuity proceeds, interest earned on active and passive investments, rental income from leasing properties and distributions received from a trust. Members will be required to declare income on an annual basis at the beginning of the new year.

**IMPORTANT NOTICE:**  
**Declaring income lower than your actual income is fraud.**  
**This may lead to the termination of your membership.**

By signing this form, you give your permission for us to verify your declared income using all relevant internal and external sources.

Please provide the following supporting documentation as proof of income, if not joining through your employer:

- Last 3 months' (90 consecutive days) bank statements; and
- If employed, your last 3 months' payslips and commission schedules, or most recent tax year's IRP5 certificate
- If student, proof of enrolment at an academic institution
- If self-employed, most current financial statements
- If pensioner, proof of annuity and/or employer pension and/or State Older Person's Grant
- If unemployed, UIF certificate

## SECTION 4

## DECLARATION BY MEMBER

I understand that this option selection will apply to my 2026 option choice.

Member signature: \_\_\_\_\_

Date: \_\_\_\_\_

## SECTION 5 DECLARATION BY EMPLOYER, IF APPLICABLE

To be completed if employer is responsible for all or part of contribution

myFED monthly salary of applicant \_\_\_\_\_

Name of employer: \_\_\_\_\_

The above details have been noted and approved. Contributions will be adjusted in terms of the scheme rules effective 1 January 2026.

\_\_\_\_\_

Paypoint code

Date

\_\_\_\_\_

Designation

Company stamp