

## Other Forms

[Direct Credit Authorisation Form Individual Health Insurance Claim Settlement](#)

[Beneficiary Designation Form](#)

[Change of Advisor Form](#)

[Change of Name and or Address Form](#)

[Declaration of Loss of Policy \(Sagicor\)](#)

[Direct Debit Authorization Form](#)

[Direct Debit Cancellation Form](#)

[Direct Credit Authorization Form - Life Policy Disbursement](#)

[Fund Withdrawal Agreement - Interest Free Loan Agreement \(Sagicor\)](#)

[Miscellaneous Request Form](#)

[Policy Loan Agreement](#)

[Request for Change in Policy \(Sagicor\)](#)

[Salary Deduction - Government and Private form](#)

[Salary Deduction Cancellation - Government and Private](#)

[Salary Deduction form - Government and Private - Increase and Decrease](#)