



Our Interest is You.

# Change of Information

Bermuda Life Insurance Company Limited

Group Life and LTD Insurance     Group Health Insurance

**I WISH TO CHANGE MY:**

Coverage (Complete Section C)     Name (Complete Section D)     Dependent Status (Complete Section E)

**A. Name of Employer**

Employer Name	Group Number	Account Number	Certificate Number

**B. Employee Name (as it appears on your Certificate of Insurance)**

Last Name	First Name	Middle Initial	Date of Birth (MM/DD/YY)

**C. Change in Coverage**

Add     Health     Voluntary Life     Dependent Classification  
 Change     Vision     Dependent Life  
 Terminate     Dental     Voluntary Spousal Life

**D. Change in Name    Change my name to:**

Last Name	First Name	Middle Initial	Date of Birth (MM/DD/YY)

**E. Dependent Coverage**

Add     Terminate    New Health Class:  A     B     C     D     E     F     G     H

**Health Insurance Information**

Country of Residence  Bermuda     Other (Specify) \_\_\_\_\_

What level of coverage do you need for your spouse?  
 None  
 Full (assumes non-working spouse)  
 Supplemental (assumes working spouse with Act benefits only)

Do you need coverage for your children?  
 No     Yes

Note: Eligible children are unmarried children under 19 years of age, or up to 26 years if enrolled in and in full-time attendance at a recognized school, college or university, or over age 19 if incapable of self-support due to a mental or physical disability.

Last Name	First Name	Middle Initial	Sex	Date of Birth (MM/DD/YY)
Spouse				
Child				
Child				

**School Information:** Note: for all children attending school overseas or 19 years of age or older and in a recognized school, college or university.

First Name of Child	Name of School, College or University	Location

**Reason for Change**

Married     Divorced     New Born     Child now 19     Spouse now Employed or Unemployed

Employee Signature

Date (MM/DD/YY)

Signature of Authorized Employer Representative

Date (MM/DD/YY)

**For Argus use only**

Changes were recorded in the system by	Date (MM/DD/YY)