

Generali Worldwide

Group Health Insurance – Beneficiary Election Form



Please complete all sections in **BLOCK CAPITALS** or tick the boxes, where appropriate.

1. Employer Name:	<input style="width: 100%;" type="text"/>		
2. Group Number:	<input style="width: 100%;" type="text"/>		
3. Employee Name:	<input style="width: 100%;" type="text"/>		
4. Employee's Identification Number:	<input style="width: 100%;" type="text"/>		
5. Birth Date:	<input type="text" value="M"/>	<input type="text" value="M"/>	<input type="text" value="D"/>
	<input type="text" value="D"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>
	(MM/DD/YY)		
6a. Permanent Mailing Address:	<input style="width: 100%; height: 60px;" type="text"/>		
6b. Cayman Mailing Address: (if different from employers address)	<input style="width: 100%; height: 60px;" type="text"/>		
7. Hire Date:	<input type="text" value="M"/>	<input type="text" value="M"/>	<input type="text" value="D"/>
	<input type="text" value="D"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>
	(MM/DD/YY)		
8. Effective Date:	<input type="text" value="M"/>	<input type="text" value="M"/>	<input type="text" value="D"/>
	<input type="text" value="D"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>
	(MM/DD/YY)		
9a. Earnings (if coverage is salary based):	<input style="width: 250px;" type="text" value="US\$"/>	Per: Month	<input type="checkbox"/>
		Year	<input type="checkbox"/>
9b. Reason for Beneficiary Election:	New Coverage	<input type="checkbox"/>	Change in Amount Insured
		<input type="checkbox"/>	Change in Beneficiary
		<input type="checkbox"/>	<input type="checkbox"/>
10. Insurance Amount:	Basic Life:	<input style="width: 150px;" type="text" value="US\$"/>	
	AD&D:	<input style="width: 150px;" type="text" value="US\$"/>	
	LTD:	<input style="width: 150px;" type="text" value="US\$"/>	
11. Beneficiary Name (First, Middle, Last):	Relationship:	Percentage:	
<input style="width: 400px;" type="text"/>	<input style="width: 200px;" type="text"/>	<input style="text-align: center; border: none; border-bottom: 1px solid black;" type="text" value="%"/>	
<input style="width: 400px;" type="text"/>	<input style="width: 200px;" type="text"/>	<input style="text-align: center; border: none; border-bottom: 1px solid black;" type="text" value="%"/>	
<input style="width: 400px;" type="text"/>	<input style="width: 200px;" type="text"/>	<input style="text-align: center; border: none; border-bottom: 1px solid black;" type="text" value="%"/>	
<input style="width: 400px;" type="text"/>	<input style="width: 200px;" type="text"/>	<input style="text-align: center; border: none; border-bottom: 1px solid black;" type="text" value="%"/>	

12. Special Remarks:

FRAUD WARNING NOTICE:

Any person who, with the intent to defraud or knowing that he/she is facilitating a fraud against an insurer, submits a request for enrollment or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Employee's Signature:

Date: (MM/DD/YY)

Telephone Number
(include area code):

EMPLOYEE AND EMPLOYER PLEASE RETAIN A COPY FOR YOUR RECORDS

This completed and signed form may be returned to:

Generali Worldwide,
PO Box 10281, Grand Cayman,
KY1-1003 Cayman Islands.
or Fax +1 345 943 7288
or Email caymanservicing@generali-healthcare.com

Office: Generali Worldwide, Suite 14, Grand Pavilion Commercial Centre, 802 West Bay Road, Grand Cayman, KY1-1003

Mailing address: Generali Worldwide, PO Box 10281, Grand Cayman, KY1-1003 Cayman Islands.

Regulated in the Cayman Islands as a licensed insurer by the Cayman Islands Monetary Authority.

Incorporated in Guernsey under Company Registration No. 27151.

Tel. +1 345 940 2000 Fax +1 345 943 7288 Email caymanservicing@generali-healthcare.com

generali-healthcare.com

Generali Worldwide is a trading name of Utmost Worldwide Limited

Registered Head Office address: Utmost Worldwide Limited, Utmost House, Hirzel Street, St Peter Port, Guernsey, Channel Islands GY1 4PA.

Regulated in Guernsey as a licensed Insurer by the Guernsey Financial Services Commission under the Insurance Business (Bailiwick of Guernsey) Law, 2002 (as amended).

Websites may make reference to products that are not authorized or regulated and/or are not available for offering to planholders in certain jurisdictions.