

CARD REQUEST FORM



BOTSWANA PUBLIC OFFICERS' MEDICAL AID SCHEME Administered by Associated Fund Administrators Botswana (Pty) Ltd.
Gaborone: AFA House • Plot 61918 • P O Box 1212 • Gaborone • Botswana • Telephone: (+267) 365 0555 (Call center) / 365 0500 (Reception) • Fax: (+267) 395 1165
Francistown Branch: Baines Avenue • Plot 31966 • Unit 2 • Ground Floor • P O Box 323 • Francistown • Botswana • Telephone: (+267) 241 2390 / 241 2290 • Fax: (+267) 241 2340
 www.bpomas.co.bw **Botswana Public Officers' Medical Aid Scheme**

***please complete in block letters, tick appropriate blocks unless otherwise indicated**

Date:

Option: Standard
High
Premium

Member's Details

Name:

Membership No:

ID Number:

Reason for Replacement

- Damaged
- Lost
- Fading letter/numbers
- Staying at separate towns/villages
- Not yet received card
- Other specify.....

No. of cards requested:

Member's signature.....

Date:

Disclaimer:

Each duplicate card cost P10.00

*Account Name : Botswana Public Officers' Medical Aid Scheme (BPOMAS)
Account Type : Current
Account No : 62298556807
Branch code : 282267
Branch : Corporate
Member : medical aid number*