

Join now

Scan and email completed form to: info@sanlamreality.co.za
For benefit and membership queries, call: 0860 732 548/9

www.sanlamreality.co.za



Personal details

Title: _____
Initial(s): _____
First name: (As per ID) _____
Preferred name: _____
Surname: _____
Gender: _____
Date of birth: _____
Identity number: _____

If the Family option is selected please complete the section below:

Name	Surname	Relationship	Date of birth	ID Number
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Contact details

Postal address: _____

Suburb/city: _____
Postal code: _____

Tel (h): _____
(w): _____

Cell: _____
Email: _____

Intermediary details

Complete this section if an intermediary introduced you to Sanlam Reality.

First name: _____
Surname: _____
Intermediary code: _____
Contact number: _____
Product info: _____
Business unit: _____
Plan number/
policy number: _____
Product issue date: _____

Permission to use personal information

Sanlam Reality will keep your personal, health and telemetry information, as well as the information of your spouse and dependant/s, confidential. However, by signing this form, you agree to the disclosure and use of personal information. You hereby agree that your personal and financial information pertaining to products you have with the Sanlam Group, its strategic partners and membership of Sanlam Reality be shared between the aforementioned entities, directly or through a secure database in order to make certain that your information is accurate for the purpose of improving the Sanlam Reality service to its members. Your personal information shall be shared in accordance with prevailing data privacy legislation and it will not be disclosed to any unauthorised parties. We may collect, process, store and share all confidential information, as contained in this application and provided to us after the inception of your Sanlam Reality membership, to:

Administer the Sanlam Reality programme (which includes receiving your personal information from third parties in order to allocate your tier points); Health and telematics data may be shared/utilised in order to qualify for specific benefits and tier points;

Provide any services that you, your spouse or any dependant/s may require;

Enable any contracted third party that requires such information to render a service or provide goods to you or your spouse or any dependant/s on your Sanlam Reality membership, but only if such contracted third party agrees to keep the information confidential;

Enable any other entity within the Sanlam Group, where you or your spouse or your dependant/s have applied for a product, to administer the product.

Sanlam Reality membership

Please select your membership option.

(Refer to our website or call Sanlam Reality on 0860 732 548/9 to find out more about available options. For existing members who wish to change their membership option, please contact the Sanlam Reality call centre.)

Membership option	Single option	Family option
Reality Core	R129 pm <input type="checkbox"/>	R169 pm <input type="checkbox"/>
Reality Plus	R289 pm <input type="checkbox"/>	R359 pm <input type="checkbox"/>
Reality Club	R59 pm <input type="checkbox"/>	n/a

Opt in to apply for the Sanlam Money Saver credit card and an agent will be in contact with you.

You have the right to:

- Remotely access or request a copy of your personal information as processed by us;
- Ask for an update and/or correction of your personal information;
- Object to your information being used for any marketing campaigns; and opt-out at any time.
- Opt out from all future marketing material.

For more information on how Sanlam Reality processes your personal information please see our privacy policy at <https://www.sanlamreality.co.za/privacy-policy>

I hereby agree and give permission.

Debit order authorisation

I, the undersigned, hereby confirm that I apply to become a member of the Sanlam Reality programme. I authorise Sanlam Reality to debit all the monthly amounts payable in respect of the Sanlam Reality programme (which may be amended from time to time) from my bank account listed on my most recent financial product with the Sanlam Group if possible. If not, Sanlam Reality may create a debit order instruction based on the information indicated below for the specific amount which will be deducted on the first of every month unless otherwise requested. I undertake to inform Sanlam Reality of any changes to my bank details and authorise Sanlam Reality to verify such details. (Total 'SL' Debit or Real Futures Pty Ltd will reflect on your bank statement for this deduction.)

Debit order information:

Account name: _____
Bank: _____
Bank code: _____
Account number: _____
Account type: _____
Savings Transmission Cheque
Preferred debit order date: _____

Signature:

I hereby confirm that the above information is true and correct. I warrant that the information relating to my spouse and/or dependant/s, where relevant, is true and correct.

I agree that by joining the Sanlam Reality programme I am bound by Sanlam Reality's rules as set out by the programme. For full T&Cs, visit www.sanlamreality.co.za.

Signed: _____
at _____ on _____
Print name: _____