AXA MANSARD
redefining / standards
AXA MANSARD HEALTH LTD - 177, Ikorodu Road, Onipanu, Lagos, Nigeria.
Telephone: 0814 130 4026 - 9 - www.axamansard.com - RC 487419

CLIENT DATA FORM

Company Name | State | Branch

Desig nation | Department

Surname | First name | Middle name

Residential Address

DOB Day | Month | Year | Telephone

Type of Plan | E-mail

Marital Status | Number of children | Blood Gr oup | Genotype

Choice of hospital

Spouse's Name | Sex | DOB | Choice of Hospital

Names of Children	Sex	DOB	Bld Grp	Genotype	Choice of Hospital
1.					
2.					
3.					
4.					

Affix one passport photograph each of principal beneficiary and dependents with names on reverse.

Declaration;
I, ... on behalf of all persons insured under this application, hereby declare that: to the best of my knowledge, the information given above is accurate and forms the basis of the contract between the insured persons and the H ealth Plan .

Signature | Date