

HDBSU CHILDBIRTH SCHEME (8)

CLAIM FORM

MEMBER'S PARTICULARS

Full Name in Block Letter : _____

NRIC No _____

Address : _____

Telephone: _____ (O) _____ (H) _____ (PG) _____ (HP)

Name of Child : _____

Date of Birth : _____ Birth Certificate No : _____

NOTE:

PLEASE READ AND COMPLY WITH ALL INSTRUCTIONS WHEN COMPLETING THE FORM

- (1) Members with less than 6 months membership at the time of members' child birth are not eligible;
- (2) Members who are in arrears of Union's subscriptions are not eligible;
- (3) If applicant and spouse are members of HDBSU, only one claim is payable;
- (4) Photocopy of Child Birth Certificate must be attached;
- (5) Notice of claim must be duly completed and submitted to HDBSU within **sixty(60) days** from the date of the birth of the child failing which the HDBSU is under no obligation to make payment under the above Scheme.

Signature

Date

For Official Use:

Date Joined Union: _____ M/Ship No: _____

Name of Branch : _____