

LIFE POLICY

BAADA YA KAMPO APPLICATION FORM



AGENT NAME: _____ NAME OF UNIVERSITY: _____

PERSONAL INFORMATION

Full Name: _____

Date of Birth: _____ Student Reg. No.: _____

Sex: Male Female ID/ Passport No.: _____

Address: _____ Town: _____ Postal Code: _____

Mobile No.: _____ Email Address: _____

Name of University: _____ Campus: _____

Policy Owner: _____ Relationship: _____

Address: _____ Mobile No.: _____

BENEFITS STRUCTURE

| | Term | Premium | Sum Assured | Maturity value (Est) | Tick |
|--------|------|---------|-------------|----------------------|------|
| Gold | 4 | 2,110 | 100,000 | 110,000 | |
| | 5 | 2,110 | 126,675 | 139,342 | |
| | 6 | 2,110 | 155,262 | 170,788 | |
| Silver | 4 | 1,580 | 75,000 | 82,500 | |
| | 5 | 1,580 | 94,856 | 104,341 | |
| | 6 | 1,580 | 116,202 | 127,889 | |
| Bronze | 4 | 1,055 | 50,000 | 55,000 | |
| | 5 | 1,055 | 63,337 | 69,671 | |
| | 6 | 1,055 | 77,631 | 85,394 | |

BENEFICIARY DETAILS

Name: _____

Relationship: _____

ID No.: _____

Address: _____

Mobile No.: _____

Email: _____

DECLARATION BY APPLICANT

I declare that to the best of my knowledge that this information is true and agree that if the above declaration and the information provided above are not true, the benefits under the scheme shall be null and void

Signature: _____

Date: _____

Are you in good health Yes No

If No above please give details _____

Please ensure you have attached: Copy of National ID/Passport Copy of student ID/Letter of admission

Important Notice: All students **MUST** pay their premiums via the Mpesa paybill no. 328111. Please do not give cash payments to any Jubilee agent or staff. Parents are encouraged to pay directly to Jubilee through Mpesa, Check off system or a cheque. In case of any enquiry, please call our customer care desk on (020) 3281074