

## Life Choices

**PART 1** POLICY DETAILS

Policy Number \_\_\_\_\_

Policy Owner \_\_\_\_\_

**PART 2** UPDATED DETAILS☐ New Home Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_☐ New Mailing Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_☐ New Home Tel. No. \_\_\_\_\_☐ New Mobile Tel. No. \_\_\_\_\_☐ New Email Address \_\_\_\_\_☐ New Employer \_\_\_\_\_☐ New Employer Address \_\_\_\_\_  
\_\_\_\_\_**PART 3** POLITICALLY EXPOSED PERSON

The term "Politically Exposed Person" applies to persons who have or have had positions of public trust such as government officials, senior executives of government corporation, politicians, important political party officials, etc., and their families and close associates.

Does this description apply to you? ☐ Yes ☐ NoIf Yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

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**PART 4** DECLARATION

Please note the new address and/or contact details above and amend your records accordingly.

If a joint account is named above, please provide all signatures.

**Data Protection Declaration:**

By signing this form, I confirm/understand that:

- In order to administer the policy and plan Coralisle Life Assurance Company Ltd. may process any and all of the personal data provided.
- I consent to Coralisle Life Assurance Company Ltd. processing my personal data, in accordance with Coralisle Life Assurance Company Ltd.'s Privacy Policy (<https://international.cgcoralisle.com/privacy-policy/>). For additional information on your rights and how to exercise them, please access or request this Policy.
- I confirm that any personal data I provide to Coralisle Life Assurance Company Ltd. in respect of any third party, is done with that third party's consent and knowledge of Coralisle Life Assurance Company Ltd. processing of their personal data.
- I have the right for my personal data to be processed in accordance with the rights of Data Subjects under the relevant jurisdictional privacy legislation.
- I understand that this form shall be incorporated into and shall constitute a part of the policy contract between me/us and the Company.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_