



PAK-QATAR FAMILY TAKAFUL
Together for Better

Request Form for “Change in Contact Details”

Membership No: _____

Participant’s Name: _____ CNIC No: _____

I request for the following specified service(s) / alteration(s)/ change(s) in my Plan. If required, I shall complete any document(s) / requirement(s) as asked by Pak Qatar Family Takaful or as required by the Plan Terms and Conditions.

Correspondence Address: _____

Note: Please mention complete details of your address such as: House/ Flat No. Mohalla, Street No., Block No., Postal Code etc. so that you can get timely updates / intimations regarding your memberships.

Phone No. (Residence)		Cell No. 1 (Primary)	
Phone No. (Office)		Cell No. 2 (Secondary)	
Email Address:			

Declaration:

I hereby understand and agree that these changes shall form part of the plan and will be effective upon completion an execution of this form and approval here of by Pak Qatar Family Takaful

Participant’s Signature	Witness By Agent
Date: _____	Name: _____ Code: _____ Signature: _____

PAK-QATAR FAMILY TAKAFUL LIMITED

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