Sagicor

Group Life and Health Insurance Forms

BARBADOS AND EASTERN CARIBBEAN

Annual Student Certification Form
Asthma Questionnaire
Authorization for the Amendment of an Application for Insurance
Back Pain Questionnaire
CariCARE Card Use and Security Tips
CariCare Cards Notice - Barbados
Census Form
Certificate for Common Law Relationship
Child's Medical Examination Form
Child's Non-Medical Form
Customer Identity Form - Corporate
Customer Identity Form - Individual
Declaration of Source of Funds
Dental Care Claim Form
Direct Credit Authorisation form for Group Health
Direct Credit Authorisation form for Individual Health
Epilepsy Questionnaire
Foreign Account Tax Compliance Form - Corporate
Foreign Account Tax Compliance Form (FATCA) - Individual
Global Health Insurance Application
Group Creditor Health Statement
Group Health Information Change Form
Group Health Statement - Employee
Group Health Statement - Under 15
Group Insurance Enrollment Form
Group Life Conversion Form
GroupWeb Access Form
Health Insurance Claim Form
Medical Examination Form
Non-Medical Form
Out of Country Request Form
Proof of Death - Employer's Statement
Reissuance of Claims Cheques - Barbados Only
Reporting Form

Request for Group Proposal Form

Respiratory Questionnaire

Sagicor Wellness Mobile Unit

Statement of Good Health and Insurability

Vision Care Claim Form