

ON-LINE APPLICATION

eForm SICOA05-2022

ACCOUNT DETAILS					
First Name:	Middle Name:		Last Nam	Last Name:	
Maiden Name:	ID Number:				
Legal Entity Name (for Business Clients only):			Tax Identification Number (TIN)		
Email Address:		Receive E-	Receive E-mail Alerts: ☐ Yes ☐ No		
Mobile No. (Include area code):		Receive SN	ฝS Alerts:	☐ Yes ☐ No	
ONLINE SERVICE DETAILS					
☐ New Enrollment				ial Use only r Information Number	
☐ Merge User IDs Existing User IDs					
Preferred User ID					
DECLARATION AND ACCEPTANCE OF ONLINE SERVICES TERMS AND CONDITIONS					
I/we hereby request that Sagicor Investments Cayman Limited (SICL) extend on-line services and products to me/ us and in consideration of SICL doing so, I/we hereby agree to be bound by the terms and conditions published by SICL and which are applicable to its on-line services and products. I/we further acknowledge and agree that: (a) I/we have received, read and understood the terms and conditions applicable to SICL's on-line services and products; and (b) SICL may amend, vary or substitute the terms and conditions applicable to its on-line services and products from time to time in its sole and absolute discretion and that any use by me/us or on my/our instruction of such on-line products and services after the date of publication of the amended or substituted terms and conditions on SICL's website www.sagicorcayman.com, shall constitute my agreement to be bound by same. Sign here to verify that you agree to the Terms and Conditions.					
Account Holder's Signature:				Date (dd/mm/yyyy):	
Witness by:	Signature:			Date (dd/mm/yyyy):	
FOR OFFICIAL USE ONLY					
Input by:	Signature:			Date(dd/mm/yyyy):	
Authorised by:	Signature:			Date (dd/mm/yyyy):	