

**DBI CANCELLATION FORM**  
**CREDIT UNION PLUS LTD (046 9021395)**

**ACCOUNT NUMBER:** \_\_\_\_\_

I, \_\_\_\_\_ a member of Credit Union Plus Ltd  
confirm that I wish to withdraw from the DBI programme as of  
today's date.

Please choose one of the below options:

I wish for my cover to remain in place until \_\_\_\_\_

I wish to receive a refund \_\_\_\_\_

**NAME:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_