Staffordshire Police Federation Group Insurance Scheme





Partner Application Form (Late Joiner)

Definition of partner - a partner is defined as your legal spouse or civil partner. If you are not married or you do not have a civil partner, a person who is co-habiting with you and has done so for at least six months prior to joining the scheme and is financially dependent or interdependent with you.

Please complete the following and return the form to: Staffordshire Police, Federation Office, Hearn Court, Rising Brook, Stafford ST17 9QN. You will need to print this form to sign it.

inis section is	s to be	completed by ti	ne Partner		_			
Surname:					Forename(s):			
Date of birth:		/	/					
Address:								
L declare that L	am in c	ood health and:						
 I declare that I am in good health and: During the last 12 months, I have not attended or been advised to attend a hospital or clinic (excludes routine visits to a GP), for any form of advice, test, investigation or operation (excluding consultations for colds, influenza or pregnancy). 								
2. I am not currently receiving any treatment, medication or medical attention, either regularly or irregularly for any medical (includes diabetes), physical or psychiatric condition, or awaiting any medical or surgical consultation, test or investigation. (Excludes tablets, medicine or drugs taken for asthma, colds, influenza, routine vaccinations or contraception).								
3. I have never	been to	ested positive for F or any sexually tra	IIV/AIDS, or	Hepatitis I	B or C, nor am I a	waiting the result	t of such a tes	st. I have
4. No application	on to ar	Insurance Compa d, offered or accep	ny for life, a	ccident or	sickness insuran	ice, or critical illn	ess cover has	ever been
5. I share a join	nt financ	cial commitment wiship; my membersl	ith the empl	oyee/mem dent on co	ber of the schem	e and understand by the employee	I that if I am a	dmitted
I confirm that I	have ta	ken reasonable ca	re to ensure	that the s	tatements above	are honest and c	orrect. I unde	rstand that if
they are not correct this could result in the insurance being treated as though it never existed or a claim being declined.								
I hereby apply t	to join tl	ne scheme(s) with e	effect from:					
Signed:					Date:		/	
reaches 70 ye partner benef	ears, v fits wi	in in the schen vhichever occu II then be appli George Burrows	ırs first. B cable to t	enefit le he age o	vels reduce or f the subscrib	n the officers'	retirement	and
Beneficiary d	etails				1			
Surname:					Forename(s):			
Address:					-			
This section is	to be	completed by t	the New R	ecruit/Se	rving Officer			
Surname:					Forename(s):			
Station/division	n:				Collar number:			
I hereby author of the scheme(from salary eac	s). For i	deduction of the snew recruits the fire	um(s) indica st 52 weeks	ited from r of service	ny pay, in respect are free, followin	t of my partner's g which the norm	membership nal premium v	vill be deducted
Main Package Scheme		£12.48* per month Federation's admir			Group Critical Illness scheme		r month. No ac is applied to t	
*The premiums p		and Insurance Pre will be subject to pe	•		o up or down.			
Signed:					Date:		/	/

Data Privacy Notice

George Burrows is a trading name of Arthur J. Gallagher Insurance Brokers Limited (Gallagher).

We are the data controller of any personal data you provide to us. We collect and process personal data in order to offer and provide insurance services and policies and to process claims. Personal data is also used for business purposes such as fraud prevention and detection, financial management, to generate risk modelling, conduct analytics including to advise, improve and develop our products and services and to comply with our legal and regulatory obligations. This may involve sharing information with, and obtaining information from, our group companies and third parties such as (re)insurers, other brokers, loss adjusters, credit reference agencies, service providers, professional advisors, our regulators or fraud prevention agencies. We may record telephone calls to help us to monitor and improve the service we provide as well as for regulatory purposes.

Please see our Privacy Notice for further information on how your personal data is used, shared, disclosed and retained, your rights in relation to your personal data and how to contact our Data Protection Officer. Our Privacy Notice can be found at https://www.ajg.com/uk/brokerage-privacy-policy/. From time to time we may make important updates to our Privacy Notice and these may in turn affect the way we use and handle your data. Please ensure you review our Privacy Notice periodically to ensure you are aware of any changes.

If you are providing us with personal data of another individual that would be covered under the insurance policy we may be placing or services we may provide to you, you shall ensure that you have obtained all appropriate consents, where required, tell them you are providing their information to us and show them a copy of this notice. You must not share personal data with us that is not necessary for us to offer, provide or administer our services to you.

