

## **Benevolent Fund**

## KENT POLICE STAFF BENEVOLENT FUND **Application to Join** Force number: First Names: Surname: Date of birth: **Contact Details: Address: Telephone:** Home: Station: Mobile: **Date of Joining Kent Police:** I Hereby apply to join the above fund. I agree to pay the contributions as laid down in the Rules of the Fund or as amended with the rules. I agree for the deductions indicated to be taken directly from my monthly salary. For the purposes of the death grant I would like to name my beneficiary as: Name: Relationship to me: Signed: Date: