

West Midlands Police Federation Group
Insurance scheme
Additional Critical illness application
form



This form is applicable to serving officers and their partners who are already subscribing to the Group insurance scheme. Additional Critical illness insurance is subject to continued membership of both schemes.

Please complete the following and return the form to: Westmidlandspf@polfed.org

Member Details:

Warrent number:		Date joined main scheme:	<input type="text" value="/"/>	<input type="text" value="/"/>
Surname:	<input type="text"/>	Forename(s):	<input type="text"/>	
Date of birth:	<input type="text"/>	Email:	<input type="text"/>	
Address:	<input type="text"/>			
	<input type="text"/>			

Partner/Spouse Application (if required):

Partner' means the person to whom the member of the associated policy is married or, if the member is not married, a person who is openly cohabiting with him or her and who has been so cohabiting for the six months' period prior to the date of their inclusion in the policy, and on whom such a member is financially interdependent.

	Date joined main scheme:	<input type="text" value="/"/>	<input type="text" value="/"/>
Surname:	<input type="text"/>	Fornames(s):	<input type="text"/>
Date of birth:	<input type="text" value="/"/>	Telephone:	<input type="text"/>
Address:	<input type="text"/>		
<input type="text"/>	Email:	<input type="text"/>	

I confirm that I have read the Canada Life Group Critical Illness Insurance Member Guide.

I understand that the policy terms contain exclusions, which are fully described in the member guide, this may mean that the benefit will not be payable. In particular, no benefit will be payable if:

The condition diagnosed or circumstance involved does not meet the relevant definition of a critical illness.

- The illness is a pre-existing medical condition.
- I had a related condition at the time of joining .

Pre-Existing medical condition

No benefit will be payable under your employer's policy in respect of an insured illness (or repeat of the same insured illness) which was first diagnosed, treated, or which was known to have existed by the potential claimant (you or your child) before entering this policy, or any previous critical illness policy arranged by your employer, or the date of any increase in benefit.

Related condition

No benefit will be payable for an insured illness if any related condition existed at any time prior to entering this policy, any other critical illness policy arranged by your employer or the date of any increase in benefit.

Tick the box to show which level of additional cover you require

	Benefits	Officer	Partner
Tier 1	£7,500	£4.15	£5.40
Tier 2	£10,000	£5.50	£7.20
Tier 3	£12,500	£6.90	£9.00
Tier 4	£15,000	£8.30	£10.80
Tier 5	£17,500	£9.65	£12.60

*The premiums payable will be subject to periodic review and may go up or down

Note: All cover ceases at the age of 70 or retirement, whichever occurs first

I confirm that I have taken reasonable care to ensure that the statements above are honest and correct. I understand that if the details provided are untrue, inaccurate or incomplete, this may result in refusal of a claim and/or my policy being cancelled or treated as if it never existed.

If you are unable to meet the above Declaration please contact Gallagher by telephoning 01403 327719

I/We wish to join the Additional Critical Illness Scheme and hereby authorize the deduction selected within this application, per month (inclusive of the Federation's administration fee and Insurance Premium Tax) from my pay in respect of my membership of the scheme.

Member Signature:

Date: / /

Partner Signature (if required):

Date: / /

DATA PRIVACY NOTICE

How do we maintain your privacy?

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/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.



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