

# British Transport Police Federation Group Insurance Scheme Partner Application Form



'Partner' means the person to whom the member of the associated policy is married or in a Civil Partnership with or, if not, a person who is openly co-habiting 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.

**Please return the completed form to: British Transport Police Federation, Federation Office, 134 Thurlow Road, West Dulwich, London SE21 8HN. ONCE COMPLETED YOU WILL NEED TO PRINT THIS FORM TO SIGN IT.**

**This section is to be completed by the Partner**

Surname:		Forename(s):	
Date of birth:	/	/	
Address:			

I declare that I am in good health and:

1. 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, asthma, 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 tested positive for HIV/AIDS, or Hepatitis B or C, nor am I awaiting the result of such a test. I have not tested positive for any sexually transmitted infection in the last 5 years, nor am I awaiting the result of such a test.
4. No application to an Insurance Company for life, accident or sickness insurance, or critical illness cover has ever been declined, postponed, offered or accepted with special terms or restrictions, or been withdrawn for any medical reason or hazardous pursuits.
5. I share a joint financial commitment with the employee/member of the scheme and understand that if I am admitted to scheme membership; my membership is dependent on continuity of cover by the employee/member.

I confirm that I have taken reasonable care to ensure that the statements above are honest and correct. I understand 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 to join the scheme with effect from:

/	/	
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Signed:		Date:	/	/	
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Partners can remain in the scheme until they reach the age of 70 years or until the serving officer reaches 70 years, whichever occurs first. Benefit levels depend on the age of the subscribing officer. Please refer to the Federation or George Burrows for further information. Partner cover is conditional to the serving officer's continued membership of the scheme.

**Beneficiary details** (Please notify the Federation immediately of any changes to your personal or beneficiary details)

Surname:		Forename(s):	
Address:			

**This section is to be completed by the New Recruit/Serving Officer**

Surname:		Forename(s):	
Station/division:		Payroll number:	

I hereby authorise the deduction of the sum of £9.36\* from my pay, per lunar month, in respect of my partner's membership of the above scheme.

\*The premium includes Insurance Premium Tax (IPT)

Premium payments are subject to periodic review and may go up or down

Signed:		Date:	/	/	
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**Please read the Data Privacy Notice on the reverse of this application form.**

## Schedule of benefits for partners of serving officers:

<b>Life Assurance</b> Advance of benefit on terminal prognosis ( <i>age 68 and under</i> )	<b>£65,000</b> <i>20% of sum assured</i>
<b>Personal Accident Benefits</b> ( <i>See table on page 9 for summary of benefits provided</i> )	<b>Member only</b>
<b>Critical Illness Insurance</b> Red Arc Service	<b>£5,000</b> Included
<b>RAC Motor Breakdown Assistance</b> ( <i>UK &amp; European</i> )	<b>Member only</b>
<b>Mobile Phone / Gadget Insurance</b>	<b>Member only</b>

The cover included in this scheme is summarised in the scheme booklet, which is available to download from the Federation website: [www.btpolfed.org.uk](http://www.btpolfed.org.uk)

Full details of cover, terms and conditions (including exclusions and limitations) can be found in the policy wordings which are available from the Federation or George Burrows.

### 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 modeling, 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.

