Defence Police Federation
Group Insurance Scheme
Retiring Officer Application Form
(Please complete and return to: UK.GroupInsuranceSchemes.Contact@ajg.com)

This form is applicable to Retired Officers who would like to continue subscribing to the Group Insurance Scheme via Direct Debit. Please complete this form alongside the Direct Debit Mandate and return to Gallagher to maintain your cover.

Member Details:

I am a subscribing serving officer: ☐ Date of Retiring from the Defence Police Force:

Surname:		Forename:	
Address:			
Force Number:		Telephone Number:	
Email Address:		Date of Birth:	

By signing this application form, you confirm that you will be in receipt of a police pension.

It is important that the information you have provided to us is to the best of your knowledge true, accurate and complete and reflects your current circumstances. If your circumstances change, please inform us. If we or the insurer discover that the details provided to us are untrue, inaccurate or incomplete, this may result in refusal of a claim and/or your policy being cancelled or treated as if it never existed.

I wish to continue my membership of the Group Insurance Scheme and I authorise the payments to be taken via Direct Debit from my bank account in respect of my membership of the scheme as indicated by ticking the applicable box below:

☐ **Retired Officer (Under age 70)** £19.85* per month

☐ **Retired Officer (Aged 70 - 79)** £25.75* per month

**The premium includes Insurance Premium Tax (IPT) and is subject to a periodic review and may go up or down.*

Signature:		**Date:**	

Cover is conditional to continued membership of the scheme and ceases at age 80. Some benefits reduce or cease depending on age category. Please contact the Police Federation or Gallagher for further information.

Please complete the section overleaf to confirm beneficiary details and read the Data Privacy Notice.

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

Surname:		Forename:	
Address:			
Email Address:			
Relationship to Member:			

The maintaining of an up-to-date will is advised. Payments are made by the Trustees under the terms of the 'Trust Deed', which would normally be to the member's chosen beneficiary. The Trustees will, at their own discretion, agree payment in the event of a life claim. I understand that in all matters, in accordance with the Trust Deed, the decision of the Trustees is final.

National Insurance Number: _____

Date Joined Scheme: _____

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.

Gallagher

Insurance | Risk Management | Consulting

Arthur J. Gallagher Insurance Brokers Limited is authorised and regulated by the Financial Conduct Authority. Registered Office: Spectrum Building, 55 Blythswood Street, Glasgow G2 7AT. Registered in Scotland. Company Number: SC108909
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