

Sickness Benefit Plan and Society Membership Application

Colin Buggs

"I would highly recommend this organisation, the benefits I have received over the years have been very gratefully received. I have only ever claimed Optical and Dental but these costs do add up and being able to claim all or some of the money back, has been very welcome."

How to Apply for the Sickness Benefit Plan and Become a Society Member

You can apply for membership by applying at graveshamfriendly.co.uk/membership-application or complete the application form opposite, including the direct debit instruction to your bank and post to Gravesham Friendly Head Office at:

Gravesham Friendly The Old Rectory Northfleet Gravesend DA11 8HN

The bank account details you provide will be used to make claim payments.

Once we have received your application, we will review the information provided. As long as everything is in order, we will send you a welcome pack containing the following items:

- Sickness Benefit Plan KEY FACTS DOCUMENT
- Your Right to Cancel Notice
- Member Feedback Form
- Details of How to Claim Benefits Document

Section 1

Application for Membership





Email			
Please give your home address below:			
	Home Telephone:		
	Mobile Telephone:		
	Date of Birth:		
	Age Next Birthday	:	
Post Code:	Next of Kin:		
Optional: If relevant please specify name of enthat recommended/suggested you considered			
£	☐ Annual		

Section 2 Identity Checks

We are required to verify your identity when you become a Member of the Society. Please provide separate forms of identification for your name and address. For example, if you provide your driving licence as proof of your name you must provide another form of identification for your address, such as a utility bill.

Please tick one box in each column and send us a copy of the original document.

If you are applying online via **www.graveshamfriendly.co.uk/membership/application** you can upload a photograph or scanned copy of these documents.

Proof of Name	✓	Proof of Name	/
Current UK or EEA photocard driving licence		Utility bill (gas, electric, satellite television, landline phone bill) issued within the last three months.	
Full old-style driving licence		Local authority council tax bill for the current council tax year.	
Original birth certificate (UK birth certificate issued within 12 months of the date of birth		Bank, Building Society or Credit Union statement or passbook dated within the last three months.	
Benefit book or original notification letter from Benefits Agency		Original mortgage statement from a recognised lender issued for the last full year.	
Residence permit issued by the Home Office to EEA nationals on sight of own country passport		Council or housing association rent card or tenancy agreement for the current year.	
National identity card bearing a photograph of the applicant		NHS Medical card or letter of confirmation from GP's practice of registration with the surgery.	
		Benefit book or original notification letter from Benefits Agency (but not if used as proof of name).	
		HMRC self-assessment letters or tax demand dated within the current financial year.	

Section 3

Please read and complete the membership declaration.



General Data Protection Regulation

Gravesham Friendly collects your information when you apply to become a member through the Sickness Benefit Plan. The information disclosed by you will be used by the Society to set up and manage your membership and the Sickness Benefit Plan you have applied for. The Society will not share your data with third parties for any purposes subject to its legal or statutory obligations. If you would like more information on how the Society uses your personal information, please see our Privacy Policy which can be found on our website.

The Society may wish to contact you in the future with marketing information relating to other products that may be of interest to you. However, the Society will only do this if you р

remain in place until you let the Society know otherwise.
You can update the Society at any time, opting in or out of
marketing, or changes in the ways in which you would prefer
the Society to contact you. You can update your marketing
preferences by contacting the Society by email at info@
GraveshamFriendly.co.uk or by telephone
on 01474 567050 .

If you wish to hear about future products, please tick the boxes below. I am happy to be contacted and prefer to be

are	happy to receive such information. Once your marketing erences have been updated, they will	☐ Phone ☐ Post
	confirm all the personal information provided about myself	is true and accurate.
	-	s and needs, it provides me with sickness benefit payments if I rel of cover provided is not designed to replace my total income.
	confirm I have read and understood the content of this broad	chure and no advice has been given to me by the Society.
	l confirm I am employed, self-employed or seeking employn	nent and to the best of my knowledge fit to work.
	I declare that I have not been diagnosed with a terminal illne to a terminal illness.	ess and am/ or will not be undergoing any investigation related
_ (I understand that this application shall form the basis of the disclose any facts that may be regarded as material (i.e., factause the insurance and Society membership to be declare	cts likely to influence the acceptance of this proposal) may
	I understand the value of the Sickness Benefit Plan may deamy membership.	crease and discretionary benefits may change over the term of
	I understand that my membership contract will not commend contribution paid.	ce until this application has been accepted and the first

contacted by:

☐ Email

- · This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- · If there are any changes to the amount, date or frequency of your Direct Debit, Gravesham Friendly will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Gravesham Friendly to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- · If an error is made in the payment of your Direct Debit by Gravesham Friendly or your bank or building society you are entitled to a full and immediate refund of the amount paid in full from your bank or building society. If you receive a refund, you are not entitled to, you must pay it back when Gravesham Friendly asks you to.





Kathleen Fowler

"The Society has helped me a great deal with sickness, dental and optical claims, thank you. I want my grandchildren to join now"

Section 4 Instruction to your bank

Please fill in the form and return with your fully completed Sickness Benefit Plan and membership application form to:

Gravesham Friendly The Old Rectory Northfleet Gravesend DA11 8HN

Name and full postal address of your Bank or Building Society Title Instruction to your Bank or Building Society Please pay Gravesham Friendly Direct Debits from the account detailed in this instruction subject to the safeguarding assured by the Direct Debit Guarantee Name of Account Holder **Branch Sort Code** Bank/Building Society account number I understand that this instruction may remain with Gravesham Friendly and if so, will be passed electronically to my Bank/Building Society Originators number Reference number Signature **Payment Option** Quarterly ■ Monthly Annual Date

Banks/Building Societies may decline to accept instructions to pay Direct Debits from some type of accounts, such as savings accounts.