

**Norfolk Police Federation Application for membership and \*Group Insurance – \*in partnership with George Burrows** 

THIS FORM IS APPLICABLE FOR STUDENT OFFICERS ONLY (DURING THEIR FIRST 3 MONTHS OF SERVICE)

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| --- | --- | --- | --- |
| Surname |  | First Name |  |
| Date of Birth |  | Home Address |  |
| Postcode |  |  |  |
| Home Telephone |  | Mobile Number |  |
| Work Email |  | Home Email |  |
| NI Number |  | Payroll Number |  |
| Rank |  | Warrant Number |  |

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| My start date with Norfolk Constabulary: |  |

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| --- | --- |
| I have been informed of Police Federation of England and Wales GDPR responsibilities and have received the Privacy Notice with full details. **(Privacy Notice)** | (Please sign) |
| I give full permission for my personal data to be handled and processed in accordance with the Privacy Notice I have received. | (Please sign) |

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| Norfolk Police Federation **(NPF)** have informed me of the benefits of joining the Police Federation of England and Wales **(PFEW)** and I understand I am not required to do so. | Tick Here:[ ]  |

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| NPF have informed me that, as a member of the Police Federation of England and Wales, I may pay subscriptions to gain access to the full range of legal services but am not required to do so and may opt out of paying these subscriptions if I choose.  | Tick Here:[ ]  |
| I understand that if I opt out of paying subscriptions for full Federation membership, I will not have access to the full range of legal services. | Tick Here:[ ]  |

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| **I wish to pay Federation subscriptions at a reduced rate (£12.16pcm)** for the first year of my employment, then **£24.31pcm thereafter**, and I authorise the Chief Constable to make the necessary deduction from my salary. I understand I can cancel this subscription at any time, at which point I will lose PFEW membership services, including the George Burrows Group Insurance cover (if subscribed). | Tick Here:[ ] [ ] Yes No |

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|  understand that the policy will continue beyond said 26-week free period automatically, at a reduced monthly premium of £18.69\*pcm from week 27 to week 104 of my employment, unless or until I choose to cancel said policy. | Tick Here:[ ]  |

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| I understand that on subscribing to NPF/PFEW as a Student Officer, I have access to the George Burrows Group Insurance Scheme for 26 weeks from the date I joined Norfolk Constabulary, **for free**, and confirm I have received full policy details and information on the claim procedures. **(Group Insurance Scheme Booklet)** | Please sign |
| I understand that I can cancel this Group Insurance Scheme at any time within this free period or subsequently, without penalty, by emailing (**norfolk@polfed.org**) | Tick Here:[ ]  |

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| I understand that from week 104, as detailed above, the policy premium will be full price (£28.00\*pcm), unless or until I choose to cancel said policy. | Tick Here:[ ]  |

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

I would like the following to be recorded as my beneficiary to my Life Assurance as per the George Burrows Group Insurance Scheme and will update the Norfolk Police Federation immediately of any change to my beneficiary details.

|  |  |
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| Beneficiary Details |  |
| **Surname:** |  | **Forename:** |  |
| **Address:** |  | **Relationship to member:** |
|  |

|  |  |
| --- | --- |
| **E-mail Address & contact number** |  |

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Please note: 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.

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| * **I have received** a partner membership application form for completion by my partner, if I wish for them to benefit from the Group Insurance.

(Please return partner application to NPF, either in person @ 43 Thorpe Rd, Norwich, NR1 1ES or via email to norfolk@polfed.org  Free period applies to partner also, subsequent premiums being \*£5.59 and \*£9.20 respectively for follow on periods, as explained above and on the application form. | Tick Here:[ ]  |

The Information provided on this form will be used by the Federation to process your application for the products indicated and to administer your membership. 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.