

Kent Police Federation

APPLICATION TO JOIN KENT POLICE FEDERATION ACCIDENT, SICKNESS AND CRITICAL ILLNESS INSURANCE SCHEME

New Recruits & Transferees

I wish to become a member of the Kent Police Federation Personal Accident, Sickness and Critical Illness Insurance Scheme.

Late Entrants

I wish to become a member of the Kent Police Federation Personal Accident, Sickness and Critical Illness Insurance Scheme.

I can confirm that I have been actively at work (excluding any period of annual leave) in the past 8 weeks.

For the purposes of calculating a member's entitlement to receive a benefit as a consequence of being reduced to half pay in accordance with Regulation 28 of Police Regulations 2003 any sickness absence incurred in the twelve month period prior to joining the scheme shall not be included in any such calculation.

All applicants

I authorise the deduction from my salary, at the appropriate rate as published in General Orders, for this Group Scheme until such time as I notify the Force, in writing, for the deduction to cease. I understand that cover will start on the first day of the pay-period in which salary deductions commence.

Full Name:

Rank:

Force No:

Area:

Address:

Postcode:

Telephone:

Email:

Signature:

Date: / /

Upon completion, please return this form to:

The Federation Office, 66 & 67 Queen Elizabeth Square, Sutton Road, Maidstone Kent ME15 9BZ

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