

Critical Illness Cover Application form

This product is designed to provide a tax-free lump sum benefit of £25,000 if you are either diagnosed with a specified critical illness or medically retired (on physical grounds) from the Police Service. Please answer the questions carefully, as inaccurate information may result in a claim being declined.

Before you apply for our Metfriendly standalone Critical Illness Cover, please be aware that:

- This is available to New Recruits who have joined a UK Police Service in the last three years
- You must be aged 18 to 34
- You must currently be employed by a UK Police Service or be a Special Constable
- The policy does not cover any pre-existing conditions (see Terms & Conditions and Key Features)
- Cover will expire at age 40 or if you leave the Police Service.

For your own benefit and protection, you should read the **Key Features Document** and **policy wording** associated with this product, available by request or on the relevant product page on our website (a copy will also be posted to you once your Critical Illness policy is set up). If you do not understand any point, please ask for further information.

If you are in any doubt as to whether this Critical Illness Cover meets your protection needs, then please call us on 01689 891454 or email info@metfriendly.org.uk

I am a: <input type="checkbox"/> Serving Police Officer <input type="checkbox"/> Serving Police Staff <input type="checkbox"/> Special Constable			Rank
Mr/Mrs/Ms/Miss	Surname	Forename(s)	
First line of home address			Postcode
National Insurance Number	<input type="text"/>	Date of Birth	<input type="text"/> <input type="text"/> <input type="text"/>
			Gender M <input type="checkbox"/> F <input type="checkbox"/>
You should be able to find your NI number on your payslip, P45 or P60 form or a letter from H.M. Revenue & Customs.			
Mobile No		Email Address	

Here at Metfriendly we take your privacy seriously. We will use your email address to confirm your application. In addition, we will from time to time provide you with relevant information on financial issues relating to the Police, and the products and services we provide, including special offers by post. We will not contact you by phone for marketing purposes. If you prefer not to receive this information by post, you can email us at any time to unsubscribe (enquiries@mpfs.org.uk).

If you would prefer to receive relevant information on financial issues and our products & services relating to the Police from us by email or text message, please indicate your consent by ticking the box. You can email us at any time to unsubscribe (enquiries@mpfs.org.uk).

Date UK Police Service commenced	<input type="text"/> <input type="text"/> <input type="text"/>	Prefix & Warrant No
Payroll No (if different)		UK Force/Service
Do you smoke or have you used tobacco, nicotine products or e-cigarettes (including vaping) in the last 12 months? Yes <input type="checkbox"/> No <input type="checkbox"/>		

Confirming Your Identity

In order to process your application Metfriendly will refer to Credit Reference Agencies to confirm your identity. This search will leave a 'footprint' on your credit file, which is required to record that the check has taken place. This footprint is not the same as a credit check footprint and has no negative impact on your file. Please read the following:

ID Declaration

I understand that you will undertake a search with a Credit Reference Agency for the purposes of verifying my identity. To do so, the Credit Reference Agency may check the details I supply against any particulars on any database (public or otherwise) to which they have access. They may also use my details in the future to assist other companies for verification purposes. A record of the search will be retained. The Credit Reference Agency may disclose that information, and the fact a search was made to its other customers for the purposes of assessing the risk of giving credit, to prevent fraud, money laundering and to trace debtors. A record of the search will be retained by the credit reference agency.

See overleaf

Pre-existing and related medical conditions

Full details of pre-existing conditions and related medical exclusions are covered in the policy document in part 7. A brief summary is below.

Pre-existing critical illness

A pre-existing critical illness is one which an individual has, before the commencement of this policy:

- received treatment for
- sought advice for
- experienced symptoms of or
- been diagnosed with.

In addition, an illness previously suffered which leads to a claim for loss of limb, loss of sight, terminal illness or total permanent disability benefit is also excluded.

Related medical conditions exclusion

No benefit will be paid in respect of any critical illness where a related medical condition existed prior to the commencement of this policy unless the insured person had neither received any treatment, nor experienced symptoms, nor sought advice for that related medical condition for at least two consecutive years since the commencement of this policy.

No benefit will be paid for any loss of limb, loss of sight, terminal illness, or total permanent disability benefit where a related medical condition existed before cover starts.

Example of pre-existing and related condition exclusion

We will not pay any claim under this policy if the medical retirement/discharge or critical illness is caused, or contributed to, directly or indirectly, by any of the illnesses deemed to be the same critical illness as set out in **Part 7 Exclusions in groups 1-4** of the policy document.

Declaration

- I hereby apply for Metfriendly Critical Illness cover and accept the terms and conditions as described within the product literature and elsewhere within this application. I also confirm I have read the **Key Features Document**.
- I apply for membership of Metfriendly in accordance with the provisions of its rules (unless I am already a Member) and I agree to abide by Metfriendly's Rules at all times (a copy of Metfriendly's Rules appears on metfriendly.org.uk and is available in printed form upon request).
- I understand that no benefit will be payable for any claim under this policy if the medical retirement/discharge or critical illness is caused, or contributed to, directly or indirectly, by a pre-existing critical illness or a related medical condition.
- I declare that the foregoing statement is to the best of my knowledge and belief are true and complete. After the initial premium-free period, I authorise the deduction from my monthly salary or by direct debit of all contributions that may become due.

Signed APPLICANT	Date	Promotional Code
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The liability of Metfriendly does not begin until the application has been accepted.

OUR DATA PRIVACY STATEMENT We need the information you provide in order to set up the contract between you and us. We will share your data securely with our mailing house partners to send you legally required documents such as your annual benefit statement and invitation to our Annual General Meeting. Your data will only be kept for such a time needed to perform this task. Where possible we use external information to verify your identity and to keep our records up to date on home address changes. We use a third-party provider to deliver our marketing emails. We gather statistics around email open rates and clicks using industry standard technologies. For more information, please see our privacy notice at metfriendly.org.uk/privacy

Contact Details

Metfriendly, Central Court, Knoll Rise, Orpington, BR6 0JA Phone: 01689 891454 Email: info@metfriendly.org.uk

Metfriendly is a trading name of the Metropolitan Police Friendly Society Limited.

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