



# Simplyhealth Application Form for **Our Lady of Lourdes MAC**

Please complete all of the below sections of this form and return it to: Email: [hr@lourdesmac.org.uk](mailto:hr@lourdesmac.org.uk)

Post: Lourdes MAC, 12 The Oaks, Clews Road, Redditch, B98 7ST

## A Your details

Surname:	Title:	Date of birth:
Forename(s):		Employer:
Address:   Postcode:		Telephone (home):
		Telephone (mobile):
		Payroll Number:
Email:	Department:	

## B Level of cover

Please select below your chosen level of cover. Please note: Dependants must be added to the same level of cover as the policyholder.

	Level 1	Level 2	Level 3	Level 4	Level 5	Level 6
Employee only	£7.16	£11.71	£17.04	£20.49	£24.41	£32.62
Employee and partner	£14.32	£23.42	£34.08	£40.98	£48.82	£65.24

Premiums are monthly and include Insurance Premium Tax, at the prevailing rate.

Premiums are valid until 1<sup>st</sup> September 2020

Details of partner and up to four children under the age of 24 (free cover for children).

Title	Surname	Forename(s)	Relationship	Date of birth

### Customer's Declaration

For your own benefit and protection you should read the terms and conditions carefully before signing this declaration. By signing this declaration you are agreeing that:

- You've used the needs questionnaire and confirm that this product is suitable for you.
- You'll continue to abide by the terms and conditions of this policy.
- You're a UK resident and understand that the standard cancellation period detailed within the terms and conditions will apply to your application to join or upgrade.

We rely on the information you declare within this application in making our decision on whether or not to accept your application to join or upgrade your existing cover. If any information you declare is found to be false we may cancel your policy. Therefore please contact us, should you not understand any point or require a further information before signing.

### Marketing Preferences

We'd like to keep you informed about products and services that may be of interest to you from Simplyhealth and the companies in the Simplyhealth Group, if you're happy for us to do this please select how you'd like to hear from us:

Email  SMS  Post  Phone

Signature:	Date:
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Simplyhealth telephone: 0300 100 1020, Email: [Customer.services@simplyhealth.co.uk](mailto:Customer.services@simplyhealth.co.uk)

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