

**AVON & SOMERSET  
CONSTABULARY**

**TRAVEL INSURANCE SCHEME**

**REGISTRATION FORM – Retired Member**

As a member of the Avon and Somerset Group Insurance Scheme, you have automatic cover for ‘family’ travel Insurance, on a worldwide basis.

To register with us as an insured person under the scheme, please complete the details below and return this form to us at the address shown. You will be sent a certificate of insurance and your details will be held on our records. If you require full details before registering, please let us know.

Mr/Mrs/Miss/Ms Surname.....First Names.....

Address.....

..... Postcode.....

Tel. No..... E-mail address.....

Date of Birth..... Date of Joining.....

Pay Number..... Collar No.....

Name of Partner..... Date of Birth.....

Child (1)..... Date of Birth.....

Child (2)..... Date of Birth.....

Child (3)..... Date of Birth.....

Child (4)..... Date of Birth.....

**IMPORTANT**

I certify that I am a member of the Avon and Somerset Group Insurance scheme and that premiums are deducted from my salary. I understand that if I am not a member of the Avon and Somerset Group Insurance scheme, or if my contributions stop for any reason, no travel insurance is provided. I understand that any information about those insured, which may include sensitive data (medical history, criminal convictions), will be processed by the insurer and/or claims adjuster and/or George Burrows in compliance with the Data Protection Act 1998, and only for the purposes of providing insurance cover, administering scheme membership and handling any claims. This may necessitate providing data to third parties. We may use e-mail, telephone, post or other means to do this. If you do not want us to do this, please tick this box

Signed..... Date.....

When completed, please return to:

**Police Federation Office  
1 St David’s Court  
Windmill Road  
Kenn  
Clevedon**

