Anglo-Saxons Friendly Society Membership Application

Colin Buggs

"I would highly recommend this organisation, the benefits I have received over the years have been very gratefully received. I have only ever claimed Optical and Dental but these costs do add up and being able to claim all or some of the money back, has been very welcome."

How to Apply for the Sickness Benefit Plan and become a Society Member

You can apply for membership by applying at Anglo-saxons.co.uk/membership-application or complete the application form opposite, including the direct debit instruction to your bank and post to Anglos Head Office at:

Anglo-Saxons Friendly Society The Old Rectory Northfleet Gravesend DA11 8HN

The bank account details you provide will be used to make claim payments.

Once we have received your application, we will review the information provided. As long as everything is in order, we will send you a welcome pack containing the following items:

Sickness Benefit Plan KEY FACTS DOCUMENT

Your Right to Cancel Notice

Member Feedback Form

Oetails of How to Claim Benefits Document

Section 1 Application for Membership



Sickness Benefit Plan

Title	Forenames		Surname	
Email				
Please give your home address below:				
		Home Telephone:		
		Mobile Telephone:		
		Date of Birth:		
		Age Next Birthday:		
Post Code:		Next of Kin:		
Optional : If relevant please specify name of existing member that recommended/suggested you considered joining the society.				
Premium Option (see premium table, page 4)				
£ Monthly Quarterly Annual				

Section 2 Identity Checks

We are required to verify your identity when you become a Member of the Society. Please provide separate forms of identification for your name and address. For example, if you provide your driving licence as proof of your name you must provide another form of identification for your address, such as a utility bill.

Please tick one box in each column and send us a copy of the original document.

If you are applying online via **www.anglo-saxons.co.uk/membership/application** you can upload a photograph or scanned copy of these documents.

Proof of Name	~	Proof of Address	~
Current signed passport		Utility bill (gas, electric, satellite television, landline phone bill) issued within the last three months.	
Current UK or EEA photocard driving licence		Local authority council tax bill for the current council tax year.	
Full old-style driving licence		Bank, Building Society or Credit Union statement or passbook dated within the last three months.	
Original birth certificate (UK birth certificate issued within 12 months of the date of birth		Original mortgage statement from a recognised lender issued for the last full year.	
Benefit book or original notification letter from Benefits Agency		Council or housing association rent card or tenancy agreement for the current year.	
Residence permit issued by the Home Office to EEA nationals on sight of own country passport		NHS Medical card or letter of confirmation from GP's practice of registration with the surgery.	
National identity card bearing a photograph of the applicant		Benefit book or original notification letter from Benefits Agency (but not if used as proof of name).	
		HMRC self-assessment letters or tax demand dated within the current financial year.	

Please read and complete the membership declaration.

General Data Protection Regulation

Anglo-Saxons Friendly Society (Anglos) collects your information when you apply to become a member through the Sickness Benefit Plan. The information disclosed by you will be used by the Society to set up and manage your membership and the Sickness Benefit Plan you have applied for. The Society will not share your data with third parties for any purposes subject to its legal or statutory obligations. If you would like more information on how the Society uses your personal information, please see our Privacy Policy which can be found on our website.

The Society may wish to contact you in the future with marketing information relating to other products and services that may be of interest to you. However, the Society will only do this if you are happy to receive such information. Once your marketing preferences have been updated, they will remain in place until you let the Society know otherwise. You can update the Society at any time, opting in or out of marketing, or changes in the ways in which you would prefer the Society to contact you. You can update your marketing preferences by contacting the Society by

e Society.

email at **info@anglo-saxons.co.uk** or by telephone on **01474 567050**.

If you wish to hear about future products, please tick the boxes below. I am happy to be contacted and prefer to be contacted by:

Email	
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Phone

Post

I confirm all the personal information provided about myself is true and accurate.
I understand and agree that the product meets my demands and needs, it provides me with sickness benefit payments if I am unable to work due to certain circumstances and the level of cover provided is not designed to replace my total income.
I confirm I have read and understood the content of this brochure and no advice has been given to me by the
I confirm I am employed, self-employed or seeking employment and to the best of my knowledge fit to work
I declare that I have not been diagnosed with a terminal illness and am/ or will not be undergoing any investigation related to a terminal illness.
I understand that this application shall form the basis of the contract between me and the Society and that failure to disclose any facts that may be regarded as material (i.e., facts likely to influence the acceptance of this proposal) may cause the insurance and Society membership to be declared void.
I understand the value of the Sickness Benefit Plan may decrease and discretionary benefits may change over the term of my membership.

I understand that my membership contract will not commence until this application has been accepted and the first contribution paid.

Have you enclosed?	
 Completed Application Form Direct Debit Form Copy of 2 documents providing proof of name and address 	
Name (block capitals)	
Signature	
Date	

Kathleen Fowler

"The Society has helped me a great deal with sickness, dental and optical claims, thank you. I want my grandchildren to join now"



Section 4

Instruction to your bank

Please fill in the form and return with your fully completed Sickness Benefit Plan and membership application form to:

Anglo-Saxons Friendly Society The Old Rectory Northfleet Gravesend DA11 8HN

Name and full postal address of your Bank or Building Society

Title		Instruction to your Bank or Building Society
		Please pay Anglo-Saxons Friendly Society Direct Debits from the account detailed in this instruction subject to the safeguarding assured by the Direct Debit Guarantee
Name of Account Holder		I understand that this instruction may remain with Anglo-Saxons Friendly Society and if so, will be passed electronically to my Bank/Building Society
Branch Sort Code	Bank/Building Society account number	
		Signature
Originators number	Reference number	Date
Payment Option		
Monthly Quarterly	Annual	