

Values Travel

Additional Employee Application Form

DETAILS OF EMPLOYEE AND FAMILY MEMBERS TO BE COVERED

Eligible dependent children are covered up to the age 16 or 21 in full time education. If any of the named persons are between the ages of 70 and 79, they may be subject to special terms and/or exclusions. Please ask them to telephone our Customer Service Helpline, before you return this completed application form to us, on 0870 1655 645,

Company Name

to answer some questions concerning their health. They will then be provided with a Medical Screening Reference Number* which should be inserted below. Please note that the result may affect the level of cover we can offer the individual.

Relationship to Employee	Title	Forename	Surname	Date of Birth	Medical Reference*	Address	Cover Type (Please Tick)	Marketing Info
Employee							Individual Cover <input type="checkbox"/> Family Cover <input type="checkbox"/> Winter Sports Cover <input type="checkbox"/>	Please tick box if you do not wish to receive information on other products and services <input type="checkbox"/>
Employee							Individual Cover <input type="checkbox"/> Family Cover <input type="checkbox"/> Winter Sports Cover <input type="checkbox"/>	Please tick box if you do not wish to receive information on other products and services <input type="checkbox"/>
Employee							Individual Cover <input type="checkbox"/> Family Cover <input type="checkbox"/> Winter Sports Cover <input type="checkbox"/>	Please tick box if you do not wish to receive information on other products and services <input type="checkbox"/>
Employee							Individual Cover <input type="checkbox"/> Family Cover <input type="checkbox"/> Winter Sports Cover <input type="checkbox"/>	Please tick box if you do not wish to receive information on other products and services <input type="checkbox"/>

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Additional Employee Application Form (continued)

Relationship to Employee	Title	Forename	Surname	Date of Birth	Medical Reference*	Address	Cover Type (Please Tick)	Marketing Info
Employee							Individual Cover <input type="checkbox"/> Family Cover <input type="checkbox"/> Winter Sports Cover <input type="checkbox"/>	Please tick box if you do not wish to receive information on other products and services <input type="checkbox"/>
Employee							Individual Cover <input type="checkbox"/> Family Cover <input type="checkbox"/> Winter Sports Cover <input type="checkbox"/>	Please tick box if you do not wish to receive information on other products and services <input type="checkbox"/>

Data Protection Notice – FirstAssist Insurance Services Limited

If you apply for our products and/or services it is highly likely that we will need both personal and sensitive data about yourself and anyone else who is covered by the application form in order to administer the insurance policy and any claims which may arise. You should show this notice to any other person covered under your insurance policy. If your application includes other individuals we will assume that they have given their consent to you for you to give their information to us.

Protection of your personal data

The security of your personal information is very important to us and we are compliant with all current data protection legislation. All personal information that you supply to us either in respect of yourself or other individuals in connection with our products and/or services will be treated in confidence by FirstAssist and will be held by us for the purpose of providing and administering our products and services. This may involve the collection and processing of sensitive data (as defined in the Data Protection Act 1998) and if you

complete an application form for our products and/or services you will be giving your consent to such information being processed by FirstAssist or our agents. It may be necessary to pass your personal and sensitive data to other companies for processing on behalf of FirstAssist. Some of these companies may be based outside Europe in countries which may not have the laws to protect your personal data, but in all cases FirstAssist will ensure that it is kept securely and only used for the purposes for which it was provided.

Telephone calls

Please note that telephone calls to FirstAssist may be monitored and/or recorded.

Fraud

FirstAssist is involved in a number of initiatives to detect and prevent fraud. This may involve exchanging information about you with other insurance companies, fraud prevention agencies and the Police.

This policy is administered by:
 FirstAssist Insurance Services Limited. Registered in England & Wales No. 04617110.
 Registered Office at Marshall's Court, Marshall's Road, Sutton, Surrey, SM1 4DU.
 FirstAssist Insurance Services Limited is authorised and regulated by the Financial Services Authority.

This policy is underwritten by:
 Great Lakes Reinsurance (UK) PLC.
 Registered in England and Wales No 2189462.
 Registered office at Plantation Place, 30 Fenchurch Street, London EC3M 3AJ.
 Authorised and regulated by the Financial Services Authority.