



Please fill in the whole form using a BLACK BALLPOINT PEN, in BLOCK CAPITALS and send to: **FREEPOST RTCC-YJUK-JLZB, Benenden Health, Holgate Park Drive, York, YO26 4GG**

This form is used for (please tick all that apply):

1. Adding or removing family or friends from your membership
2. Updating personal details

1. Fill in your personal details

Title Dr Mr Mrs Miss Ms

Surname _____

Full forenames _____

Address _____

Postcode _____

Date of birth dd / mm / yyyy Gender Male Female

Email address _____

Tel no. mobile _____

Tel no. home _____

Membership number (if known) _____

Add/remove family and friends 1st person

I'd like to Add Remove Update (please tick one)

Title Dr Mr Mrs Miss Ms

Surname _____

Full forenames _____

Address _____

Postcode _____

Date of birth dd / mm / yyyy Gender Male Female

Relationship to main member _____

Email address _____

Tel no. mobile _____

Tel no. home _____

Membership number (if known) _____

Our Privacy Notice can be found at benenden.co.uk/privacy-policy or can be requested by calling us. This notice outlines how we use your data and also allows us to undertake a number of marketing activities. If you wish to object to these activities please refer to our Privacy Notice or log onto the Benenden Health member area my.benenden.co.uk

To make changes to more memberships, please use the space provided on the reverse

2. Member declaration

I understand that all my nominations and associated contributions, including any that I currently have on my membership, shall continue in force until I notify The Benenden Healthcare Society Limited. I understand that by nominating the people above, my contributions will be amended to reflect the appropriate level of payment. I agree to uphold the mutual ethos and values and will keep to the rules of the Society. A copy of the rule book is available at benenden.co.uk. I agree to the terms of the Charitable Assignment agreement.

Signature	Date dd / mm / yyyy	For Benenden Health use only		
		Membership number	Code	Pay ref.

3. This authorisation cancels or updates any previous instructions to deduct from salary or pension for The Benenden Healthcare Society Limited.

National Insurance number
(You may find this information on your pay or pension slip)

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Title Dr Mr Mrs Miss Ms

Surname _____

First name _____

Payroll, staff or pension number _____

Pay centre _____

Current employer _____

Member declaration

I authorise the deduction from my pay or pension until further notice, the sum of

£ _____

each week/month (delete as appropriate) which will be paid to Benenden Health on my behalf. I understand that if the standard contribution rate is varied in the future, this deduction for membership to The Benenden Healthcare Society Limited shall be varied accordingly.

Remember the amount you enter here should cover EVERYONE on your membership, including your own membership contribution. Please see below to work out your contribution rates.

Signature	Date dd / mm / yyyy
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By signing this form you are agreeing that your pay/pension centre can share this information with us.

Add/remove family and friends 2nd person

I'd like to **Add** **Remove** **Update** (please tick one)

Title **Dr** **Mr** **Mrs** **Miss** **Ms**

Surname

Full forenames

Address

Postcode

Date of birth **dd/mm/yyyy** Gender **Male** **Female**

Relationship to main member

Email address

Tel no. mobile

Tel no. home

Membership number (if known)

Add/remove family and friends 3rd person

I'd like to **Add** **Remove** **Update** (please tick one)

Title **Dr** **Mr** **Mrs** **Miss** **Ms**

Surname

Full forenames

Address

Postcode

Date of birth **dd/mm/yyyy** Gender **Male** **Female**

Relationship to main member

Email address

Tel no. mobile

Tel no. home

Membership number (if known)

Important information

- This membership meets the demands and needs of someone who is looking for access to healthcare services such as Medical Diagnostics, Medical Treatment, Physiotherapy, 24/7 GP and Mental Health helplines.
- We're not a private medical insurer. We provide healthcare services on a discretionary basis, except treatment for TB, which is provided on an insured basis. Our services are reviewed regularly and are subject to the resources we have available. In some cases, provision of service can be dependent on factors such as GP referral, NHS wait times and the type of treatment required.
- There are exclusions, limits, restrictions and qualifying periods for some services that apply. For full information about us and our services please refer to the Guide to Benenden Healthcare which is available on our website benenden.co.uk/importantinformation or on request by calling 0800 414 8100*.
- The services are only available to you within the UK apart from the 24/7 GP and 24/7 Mental Health telephone helplines which can be accessed from around the world.
- We're not able to pay for services obtained before we've given our authorisation (with the exception of 24/7 GP and Mental Health helplines and Mental Health Support).
- Benenden Health is a trading name of The Benenden Healthcare Society Limited. Benenden Healthcare is offered by The Benenden Healthcare Society Limited, which is an incorporated friendly society, registered under the Friendly Societies Act 1992, registered number 480F. The Society's contractual business (the provision of tuberculosis benefit) is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. The remainder of the Society's business is undertaken on a discretionary basis. Financial Services Register number is 205351. This can be verified on the FCA's website at www.fca.org.uk/register.
- Membership is available to anyone over the age of 16 who is normally a resident in the UK. Members can add friends and family to their membership regardless of their age.
- The cost of membership is reviewed regularly, and members will be notified of any increase agreed in advance of the change taking effect.
- We regularly review our services and make amendments from time to time. Should we make any changes to our services, we'll inform our members through our website, Be Healthy magazine, or other forms of direct communications.
- Members have 14 days, from the day they receive their membership pack after joining, to cancel their membership. Any payments made in this time will be refunded. All cancellations after the initial 14-day period will take effect and payments will cease at the end of the month in which the cancellation is received. If the membership contribution was paid annually in advance,

the membership will cease at the end of the month in which we receive the cancellation request, and we'll reimburse the cost of the number of full months remaining on the annual payment.

- Your membership will continue for as long as contributions are paid.
- If you have cause to make a complaint, please contact us. You can call us on 0800 414 8100*, message on our website at benenden.co.uk/contact-us or write to us. If you're still unhappy after we've investigated your complaint through our internal complaints procedure (available on our website), you may be able to refer your complaint to the Financial Ombudsman Service. You can contact them at the address below and they'll be able to advise you whether it's appropriate for them to review your complaint. Financial Ombudsman Service, Exchange Tower, London, E14 9SR. Email complaint.info@financial-ombudsman.org. uk or call 0800 023 4567. Calls are free from mobiles and landlines. financial-ombudsman.org.uk. If the Financial Ombudsman Service is unable to review your complaint, we can direct you to an alternative dispute resolution service. Please contact us at complaints@benenden.co.uk if you'd like more information.
- We don't provide advice regarding the suitability or otherwise of Benenden Healthcare for that individual. If you're unsure about whether membership is suitable for you, you should seek independent advice.
- Our staff are salaried and may receive a bonus based partly on sales activity and partly on non-sales activity.
- All communications will be in English. The laws of England will apply.
- Members may become actively involved in how the Society is run by participating in our democracy. When you become a Benenden Health member, you're automatically allocated to a Benenden Health Community through which members are able to have their say. You'll also be able to participate in key business decisions via Direct Member voting, which takes place every year ahead of the Society's Conference. You can get involved or find out more at benenden.co.uk/have-your-say/ or you can email theseecretary@benenden.co.uk

How much will it cost?

Contribution rates [^]	Monthly
Member only	£12.80
PLUS 1	£25.60
PLUS 2	£38.40
PLUS 3	£51.20

[^]From 1st April 2024, the cost of membership will increase from £12.80 to £15.50 per person, per month.

Any questions, just give us a call

 0800 414 8470*

 www.benenden.co.uk

Please note that your call may be recorded for our mutual security and for training and quality purposes.

* Lines are open 8am-5pm Monday to Friday (except bank holidays).

** Lines are open 9am-5pm Monday to Friday (except bank holidays). Please see our website for the most up to date opening times.

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