

Affiliation form

Death & Disability Insurance

Contract Allianz 909.478

Identity of the subscriber

Name	First name
Date of birth (d - m - y)	Sex <input type="radio"/> M <input type="radio"/> F
Private address: Street	No. Box
Postal code	City
Private email	Private tel. no.
Marital status <input type="radio"/> single <input type="radio"/> married <input type="radio"/> divorced <input type="radio"/> cohabiting * <input type="radio"/> widow(er)	
Institution	Personnel no.
Place	Grade and step
Office address	
Office email	Office tel. no.
Membership no. Afiliatys	

* providing the presentation of a cohabitation contract

Other persons to be insured

 Spouse

Name	First name	Date of birth
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 Child(ren) at charge

Name	First name	Date of birth
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Name	First name	Date of birth
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Name	First name	Date of birth
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Insurance inception date

____ / ____ / ____

Coverages

- Death 'all causes'
- Disability 'all causes'

Insured capitals

1. Expressed as a multiple of the monthly basic salary (= MBS = EUR)

or

2. Expressed as fixed capital

	Death 'all causes'		Disability 'all causes'	
Subscriber	1. x BMS =	EUR	1. x BMS =	EUR
	2.	EUR	2.	EUR
Spouse	1. x BMS =	EUR	1. x BMS =	EUR
	2.	EUR	2.	EUR
Child 1	1. x BMS =	EUR	1. x BMS =	EUR
	2.	EUR	2.	EUR
Child 2	1. x BMS =	EUR	1. x BMS =	EUR
	2.	EUR	2.	EUR
Child 3	1. x BMS =	EUR	1. x BMS =	EUR
	2.	EUR	2.	EUR

Monthly premium

1. Expressed as ‰ of the monthly basic salary (MBS)

of

2. Expressed as ‰ of the insured capital (IC), consequently as a fixed premium

	Death 'all causes'		Disability 'all causes'	
Subscriber	1. = (x MBS) x ‰	EUR	1. = (x MBS) x ‰	EUR
	= MBS x (x) ‰		= MBS x (x) ‰	
	= MBS x ‰	EUR	= MBS x ‰	EUR
	=	EUR	=	EUR
	2. = IC x ‰	EUR	2. = IC x ‰	EUR
	=	EUR	=	EUR
Spouse	1. = (x MBS) x ‰	EUR	1. = (x MBS) x ‰	EUR
	= MBS x (x) ‰		= MBS x (x) ‰	
	= MBS x ‰	EUR	= MBS x ‰	EUR
	=	EUR	=	EUR

	2. = IC x	%		2. = IC x	%
	=		EUR	=	EUR
Child 1	1. = (	x MBS) x	%	1. = (	x MBS) x
	= MBS x (	x	) %	= MBS x (	x
	= MBS x	%		= MBS x	%
	=		EUR	=	EUR
	2. = IC x	%		2. = IC x	%
	=		EUR	=	EUR
Child 2	1. = (	x MBS) x	%	1. = (	x MBS) x
	= MBS x (	x	) %	= MBS x (	x
	= MBS x	%		= MBS x	%
	=		EUR	=	EUR
	2. = IC x	%		2. = IC x	%
	=		EUR	=	EUR
Child 3	1. = (	x MBS) x	%	1. = (	x MBS) x
	= MBS x (	x	) %	= MBS x (	x
	= MBS x	%		= MBS x	%
	=		EUR	=	EUR
	2. = IC x	%		2. = IC x	%
	=		EUR	=	EUR

Date

Place

Signature

The personal data provided may be used by Cigna International Health Services BVBA, Plantin en Moretuslei 299, 2140 Antwerpen, Belgium, keeper of the file, for the purpose of rendering due service to the insured parties, for the management of the insurance policies, and the processing of claims. Solely to that end, the undersigned gives his/her specific and informed consent for the use of the medical data regarding his/her own person and/or the members of his/her family. The law bearing on the protection of individual privacy with regards to the use of personal information, dated December 8, 1992, provides the subject with right of access to the data and to their correction as well as with the right to consult the public records.