

## Affiliation form

### Supplementary Health Insurance

Allianz Belgium no. BCVR – 8672

#### Identity of the subscriber

Deadline to affiliate:  
six months before retirement.

Name		First name	
Date of birth (d - m - y)		Sex <input type="radio"/> M <input type="radio"/> F	
Private address: Street		Nr.	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 of employment		Grade and step	
Office address		Start date employment	
Office email		Office tel. no.	
I confirm being active for at least six more months		<input type="radio"/> Yes <input type="radio"/> No	
Membership no. Afiliatys*			

\* Visit the Afiliatys website and submit your application: <http://www.afiliatys.eu/en/subscribe.cfm>

#### Other persons to insure

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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Name	First name	Date of birth
------	------------	---------------

Name	First name	Date of birth
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### Chosen formula

		<b>Hospi Safe</b>	<b>Hospi Safe Plus</b>
Subscriber		<input type="radio"/>	<input type="radio"/>
Spouse		<input type="radio"/>	<input type="radio"/>
Child(ren) at charge	1	<input type="radio"/>	<input type="radio"/>
	2	<input type="radio"/>	<input type="radio"/>
	3	<input type="radio"/>	<input type="radio"/>
	4	<input type="radio"/>	<input type="radio"/>
	5	<input type="radio"/>	<input type="radio"/>

### Mode of payment

By direct debit       By transfer

Date \_\_\_\_\_ Place \_\_\_\_\_

Signature \_\_\_\_\_

The personal data provided may be used by Cigna, 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.