

Apply now to make the most of tomorrow

Send your completed application form to:

POIS

FREEPOST RLST-SJZE-BACC

29-33 Shirley Road

Southampton

SO15 3EW

Telephone: 0800 622 417

Email: memberservices@pois.co.uk

www.pois.co.uk

The Direct Debit Guarantee (please retain this Guarantee for your records)



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit Foresters Friendly Society will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Foresters Friendly Society to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit by Foresters Friendly Society or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society.
 - If you receive a refund you are not entitled to, you must pay it back when Foresters Friendly Society asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written notification may be required. Please also notify us.

Savings & Investment Plan

Application Form

Please read the Key Information Document and Important Information section before completing this form. Please return your completed form to POIS to proceed with your application.

Complete in BLOCK CAPITALS in black ink.

FOR OFFICE USE ONLY

Staff/Int Name

Contact/Int Number

Marketing Code

1. Your details

Title

First name

Middle name(s)

Last name

Date of birth

Minimum age entry 16 years, maximum age entry 74 years

Your NI Number

We require your National Insurance number to process your application. It can be found on a payslip, form P45 or P60.

Address

Postcode

Contact telephone

Email

Postcode for place
of work

Payer details (if different from your details)

Title

First name

Middle name(s)

Last name

Date of birth

Address

Postcode

Signature

2. Money laundering regulations

To comply with anti-money laundering requirements, we may verify your identity by carrying out an online check with a credit agency. The agency will add a note to your reference file to show that an identity check has been made. We may pass information to third parties for the prevention of crime or detection of fraud or where required by law or regulation.

3. How much do you want to save?

EITHER: Weekly (Minimum £6 per week, Maximum £60 per week)

£

OR: Monthly (Minimum £26 per month, Maximum £260 per month)

£

Note that weekly instalments can only be accepted if you are paid weekly and they are deducted from your salary. This will be subject to your employer offering this facility.

4. How do you want to make contributions?

Deduction from pay (complete section 5)

Direct Debit (complete section 6)

Contributions are collected for 10 years. If you pay by Direct Debit, we will collect your contributions on the 1st working day of each month.

Savings & Investment Plan

5. Saving through deduction from pay (complete only if you wish to make contributions through salary deduction and your employer offers this facility)

Your National Insurance (NI) Number

We require your NI number to process your application. It can be found on a payslip, form P45 or P60.

Full Pay/Pension No.

Are you paid weekly or monthly?

Weekly

Monthly

Name of pay group

Address of pay group (if known)

Postcode

I authorise the deduction of the appropriate regular amount from my pay/pension to cover contributions on this plan in addition to any existing amount paid to POIS on my behalf, or of any requested amount not exceeding the new total deduction. I understand that it will be necessary to exchange information with relevant parties in order to effect and maintain plan contributions. This will include details of any deductions being taken from my salary in respect of POIS plans being disclosed by telephone, mail or email to POIS on their request. I understand that any amendments to my deductions from salary should be arranged by POIS whenever possible.

Signature

Date

6. Instruction to your Bank or Building Society to pay by Direct Debit (please do not detach)

To The Manager

Name and full address of your Bank/Building Society branch.

Name(s) of Account Holder(s)

Sort Code

 - -

Account Number

Originator's Identification Number

2 5 3 6 8 6

Reference Number (office use only)

Instruction to your Bank or Building Society

Please pay POIS, a part of Foresters Friendly Society, Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with POIS, a part of Foresters Friendly Society, and, if so, details will be passed electronically to my Bank/Building Society.

Signature

Date

Signature

Date

Banks/Building Societies may decline to accept instructions to pay Direct Debits from some types of account, such as a savings account.

Savings & Investment Plan

7. Payment nomination (optional)

Under Friendly Societies legislation you may wish to nominate any person to receive an amount not exceeding £5,000 of the sum payable at your death from the plan. If the value of the plan at that time is less than the amount you have requested to be paid to your nominee, the value of the plan will be paid. The person nominated may not be an officer or employee of POIS or Foresters Friendly Society unless also a close relative. If you wish to take advantage of this facility please complete the nomination form below. If you marry after making this nomination then the nomination is annulled, and a new nomination should be made.

I hereby nominate

Witnessed by*

Title

Title

First name

First name

Last name

Last name

Of (nominee's address)

Of (witness address)

Postcode

Postcode

Relationship to
policyholder

Signature

to receive £

Date

(not exceeding £5,000) upon my death

* The witness must not be the nominee, the policyholder or a relation to the policyholder.

8. How we will use your data

The information that you provide on this form will be held by POIS, a part of Foresters Friendly Society, and used to set up and administer the plan for which you are applying and for other business purposes. Further information about how we hold and use your personal information is available on our website (www.forestersfriendlysociety.co.uk/privacy-policy).

Where an application is made via a Financial Adviser (FA), you agree to your details being disclosed to that FA until you instruct us otherwise.

We (Foresters Friendly Society, including your Branch) would like to provide you with information about products, services and events which may be of interest to you. To consent to receive this, please select your preferred option(s) below:

Post Email Text Message (SMS) Phone

You can update your preferences at any time by calling 0800 783 4162, emailing memberservices@forestersfriendlysociety.co.uk, completing the online form available at www.forestersfriendlysociety.co.uk/contactpreferences or writing to us at: Foresters Friendly Society, 29-33 Shirley Road, Southampton SO15 3EW.

From time to time, carefully selected third parties that Foresters Friendly Society work with may like to contact you about products, services and events which may be of interest to you. To consent to receive this, please select your preferred option(s) below:

Post Email Text Message (SMS) Phone

As above, you can update your preferences at any time via the methods provided.

Please turn over to continue and complete your application

Savings & Investment Plan

9. Health Declaration

I declare, to the best of my knowledge and belief, that the following statements are true (please tick boxes):

- I have not been diagnosed with and/or suffered with cancer, stroke, heart or lung disease in the last five years.
- I have not been diagnosed as having a terminal medical condition.*

*A terminal medical condition is one that has no known cure or has progressed to the point where it cannot be cured, and in the opinion of the attending consultant, it is expected to lead to death within 12 months.

If you are unable to declare that the statements above are true, we regret that we will be unable to accept your application. If you declare that the statements are true and we later find out that one or more of the statements are not true, we may close the plan. If we do this, we will not pay the amount of the life cover; we will either return the value or return the amount you have paid in (without interest). It is therefore important that you consider the statements above carefully before you sign the application.

I consent to the provision of medical information (about both my physical or mental health) to Foresters Friendly Society, both before and after my death, from any doctor who has at any time attended me. I agree that a copy of this consent is as valid as the original.

Signature

Date

10. Declaration

This is our standard client agreement upon which we intend to rely. For your own benefit and protection you should read these terms carefully before signing them. If you do not understand any point please ask for further information.

I wish to apply for the POIS Savings and Investment Plan.

I have read and understood the Savings and Investment Plan Key Information Document and Important Information section. I confirm that I am a UK resident (excluding Isle of Man and Channel Islands) and I declare that to the best of my knowledge and belief the statements provided on this Application Form are true and correct.

I confirm that, once this plan starts, the combined amount I will then be paying into Savings and Investment Plans held with POIS will not exceed £260 a month and the amount I will be paying into qualifying plans will not exceed my current annual limit of £3,600.

I understand that I will be entitled to Foresters Friendly Society surplus in the event of the closure of the Society only after having been a member for five years. I understand that a copy of the Rules and Memorandum are available upon request.

I confirm that I have not been given advice by POIS or Foresters Friendly Society in relation to the

Signature

Date

Information, including a copy of this document, is available in large print, audio and Braille upon request.

POIS is not part of the Post Office or Royal Mail plc. POIS is a part of Foresters Friendly Society which is the trading name of The Ancient Order of Foresters Friendly Society Limited which is an Incorporated Friendly Society (Registration No. 511F) and is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (Registration No. 110029).

562/2017/SIPBRO/11/17

