

DEPENDANT APPLICATION FORM



Groupe Humanis

Volontaire du service civique on mission abroad | Health and Providence

> VOLUNTEERS'S IDENTIFICATION

Name

Birth name

First name

French Social Security registration number

> BENEFICIARY

Please extend my cover to the following people :

Spouse*, or dependant cohabitant*, dependant partner*

Last Name

First Name Date of birth

Sex F M Social security or CFE Number

1st child

Last Name

First Name Date of birth

Sex F M Social security or CFE Number

2nd children

Last Name

First Name Date of birth

Sex F M Social security or CFE Number

* I hereby testify that my spouse, dependant cohabitant or dependent partner is :

- totally dependant since
- does not have any private income,
- does not work,
- and does not perceive, on a purely individual basis, pension or revenue of any kind.

SECTION DEDICATED TO HUMANIS ASSURANCES SERVICES

CONTRACT NUMBER

N° ASSURÉ

TO FACILITATE THE REGISTRATION OF YOUR DECLARATION

- 1- Write in block capitals.
- 2- Date and sign your declaration.
- 3- Join a copy of the family record book or marriage certificate or birth certificate of your co-habitant partner or dependant partner.
- 4- Send it to:
WELCARE
BP 30
41914 Blois cedex 9 - France

I, the undersigned, certify that the information provided in this form is complete and correct.

Drawn up in on

Signature (preceded by the mention "read and approved")

The management of your medical insurance plan is operated by Humanis Assurances, through its specialized service in the social protection of persons in international mobility, named WELCARE.

In accordance with current regulations, and, more specifically, with the General Data Protection Regulation no. 2016/679 of 27 April 2016, the information you send to us via this website is required to enable you to use the website and access its various features. This information is processed by Humanis Assurances, whose contact details are provided above.

Each form or remote service limits the collection of personal data to that strictly necessary and notably informs you of the purposes for which this data is being collected, the recipients duly authorised to access it to respond to your request, as well as your rights with regards to the processing of your personal data and how you can exercise them. Personal data collected as part of the services offered by this website is processed using secure protocols and is used to manage requests received through IT applications. Personal data collected through the website is processed in France. Your data is not kept any longer than the duration required for the purposes for which it is processed.

For further information or to exercise your rights on the processing of your personal data on this website, you can contact the Humanis Group's data protection representative (DPR) by writing to:

- protection-donneespersonnelles@humanis.com or

- Groupe Humanis - Cellule Protection des données personnelles - 141 rue Paul Vaillant Couturier - 92246 Malakoff cedex, France.

We may ask you to provide proof of identification to confirm your identity before responding to your request.

To find out more, please read the legal notices on the welcare.fr website.

In any event, you can contact the CNIL directly at the following address: 3 place de Fontenay - TSA 80715 - 75334 Paris cedex 07, France.

The hyperlinks that appear on this website give access to websites that may collect personal data. From then on, it is up to you to read the legal notices of each of these websites.

If you do not wish to be contacted by the Humanis group or its partners entrusted by the group and receive information about their offers, products and services, please tick this box .

If you do not wish to be contacted by the Humanis group or its partners entrusted by the group and receive newsletters, please tick this box .