Income Assured Plus

Application to end your Career Break



PLEASE COMPLETE IN BLACK INK USING BLOCK CAPITALS ANSWER ALL

QUESTIONS AND WHERE APPLICABLE TICK YOUR CHOICE							For office use only	Ref.			
YC	OUR DETAILS										
We	will use this informa	ation to updat	e you on the st	atus of your a	application	n or for oth	ner service re	elated r	natters.		
	Please insert your			,	11						
2.		Ms .	Miss	Other	If 'othe	r' please sp	ecify				
	First name(s)										
	Surname										
3.	Address										
	Postcode										
4.	Telephone No. (Ho	me)				(Wo	rk)				
	(Mob	ile)									
5.	Email address										
6.	Date of birth		M M / Y	YYY							
AC	TION REQUEST	ED									
7.	Do you want to en	d your career	break?							Yes 🗌	No 🗌
8.	If applicable, would you like to resume My Extra Benefits on your contract? Yes No N/A								N/A		
9.	Please provide the Month you wish to end your career break (Please note this will always be the 1st of the month).										
10.	When would you li	ke your premi	um payments t	o be collected	d?						
	6th of the mor	nth 🗌 18th d	of the month	(If no date is g	iven paym	ents will be	taken on the	6th of	the month).		
DE	CLARATION										
11.	11. Has your employment changed since you began your career break? Yes No										
	If 'yes' please comple www.cirencester-frie										
SIC	GNED										
und	ereby apply to amen derstand that, if app and the Society. Ta	roved, the cha	inges containe	d in this appli	cation for	m shall am					
Sig	nature						Date	D	D / M M	/ Y Y	Y

Print Full Name





Please fill in the whole form using a ball point pen and send it to:

Cirencester Friendly Society Limited
Mutuality House
The Mallards
South Cerney
Cirencester
Glos.
GL7 5TQ

Name(s) of account holder(s)

Bank/Building Society account number

Branch sort code

Name and full postal address of your Bank or Building Society
To: The Manager

Bank/Building Society
Address

Instruction to your Bank or Building Society to pay by Direct Debit

Service	e user	numbe	er						
9	3	0	3	7	9				
Refere	nce					_			
account the Dire	detailed ct Debit with (Cire	ncester f I in this I Guarant encester	Friendly nstructi tee. I un Friendly	Society on subje derstand / Society	Limited) ect to the d that the Limited) Direct Debits from the ne safeguards assured by nis Instruction may d) and, if so, details will ciety.			
Signature(s)									
Date									

Banks and Building Societies may not accept Direct Debit Instructions for some types of account



This guarantee should be detached and retained by the payer.

The Direct Debit Guarantee

Postcode



- 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 Cirencester Friendly Society Limited will
 notify you 5 working days in advance of your account being debited or as otherwise agreed. If you request Cirencester
 Friendly Society Limited 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 Cirencester Friendly Society Limited 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 Cirencester Friendly Society Limited asks you to.
- You can cancel a Direct Debit at any time by simply contacting your Bank or Building Society. Written confirmation may be required. Please also notify us.