

**IMPORTANT – THIS FORM MUST BE COMPLETED**

***NWPBF Admission Booking Form  
Appointment Information Sheet & Declaration of Membership***

Please complete all relevant sections and forward with your application form, to the Police Federation office.

***Please note that we do now require two payslips from all officers who apply for treatment in order to confirm their continued donations – one current and one from at least 6 month's previous***

**IMPORTANT – PLEASE NOTE – PART 3** – a signature should be requested from the physician/consultant who put you off work or is treating the injury/illness you are requesting support against.

<i>To be completed by patient</i>	<i>To be completed by Admissions/Convalescent Home</i>
Please refer to the attached application form	
Preferred dates for attendance are:	
Dates when unavailable are:	From

**Please Note that upon receipt of your treatment date being issued YOU are responsible for informing your Line Manager as soon as is practically possible in order for Corvus to be updated within your dates.**

***To be completed by Line Manager ONLY:***  
 (or that person responsible for entering this leave on CARMS)  
**(Before being submitted to Fed)**

Signed .....Printed .....

Station..... Telephone No: .....

***Declaration to be completed by officer/pensioner: MUST BE COMPLETED***

I confirm that, I am a serving officer, and I make regular contributions to the North West Police Benevolent Fund

**Or**

I confirm and declare that whilst a serving officer, I was a subscribing contributor to the North West Police Benevolent Fund.

**Date Joined Force.....Date of Retirement .....**

**Signed .....Date .....**

**Full Name .....**

**Address .....**

**Contact Tel No..... National Ins No: .....**