

## Insurance Application 2008/2009

Please make sure you have read the *Insurance Information* before completing this form. If you have any queries about the cover itself please contact our insurance brokers, Aon, on 01179 485002. If you have any questions about taking out insurance please contact the Britain in Bloom team on 020 7821 3360 or email [britaininbloom@rhs.org.uk](mailto:britaininbloom@rhs.org.uk). Completed forms should be returned together with the premium and the NFU Mutual proposal form(s) (signed on both sides) pertaining to the cover required to Britain in Bloom, RHS, 80 Vincent Square, London SW1P 2PE.

### STEP 1. Group Details: (All insurance correspondence will be sent to this person)

Title	Surname	Forename
Name of group		
Address		
Postcode		
Tel:	Email:	

### STEP 2. Insurance products required:

		Price	Please tick	Total
Employers' & Public Liability Insurance (choose one)	£2m cover	£67		
	£5m cover	£79		
Equipment, Cups & Trophies Insurance (choose one)	£5,000 cover	£83		
	£10,000 cover	£124		
	£15,000 cover	£145		
<b>Total</b>				<b>£</b>

**Please turn over and complete payment details**

**Step 3. Payment Method:** please tick the appropriate box:

- Pay by Direct Debit – I have completed the Direct Debit mandate below
- Pay by cheque – I have enclosed a cheque made payable to The Royal Horticultural Society with our society's affiliation number written on the back
- Pay by credit/debit card – I have entered my card details below

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**Payment by Direct Debit**



Name and address of your bank/building society

Originator's no.

9	9	8	9	7	9
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The manager

Bank/Building Society

Address

Postcode

Name(s) of account holder(s)

Sort code

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Account number

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Banks and building societies may not accept Direct Debit instructions for some types of accounts

**Instruction to your bank or building society** Please pay The Royal Horticultural Society Direct Debits from the account detailed in the instruction subject to safeguards assured by the Direct Guarantee. I understand that this instruction may remain with The Royal Horticultural Society and, if so, details will be passed electronically to my bank/building society.

Signature

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Date

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**Payment by credit/debit card**

Card no.

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Issue no. (Switch only)

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Start date

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Expiry date

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Cardholder's name

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Signature

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Date

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