

Please complete the application form in block capitals only with ball-point pen, sign it and send it to : SMEREP - SEM - Service Adhésions - 16 Boulevard du Général Leclerc - 92115 Clichy Cedex.

Don't forget to enclose your payment, an attestation of university attendance (or a copy of your student card), a copy of your ID and your bank details. If any of your details change during the year, please let us know.

If you would like to join your spouse or your child(ren), please download a new application form for each one on www.mutuelle-sem.fr, section "Downloads".

SEM only			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Origine	Lieu	Code opé.	Agent
Membership N° :			
Start date of mutual membership :	<input type="text"/>	<input type="text"/>	<input type="text"/>
	day	month	year

YOU :

Mrs Mr Name :

Birth Name :

First Name :

Address :

Post code : City :

Phone : Cellular :

E-mail :

Date of birth : day month year

Location of birth : Dpt : Country :

Nationality :

Country of usual residence :

Your establishment and its address :

TICK THE APPROPRIATE BOX :

• Tranquillité		
Duration	"100"	or "150"
15 days	<input type="checkbox"/> 32€	<input type="checkbox"/> 38€
1 month	<input type="checkbox"/> 42€	<input type="checkbox"/> 47€
1 month 1/2	<input type="checkbox"/> 63€	<input type="checkbox"/> 70€
2 months	<input type="checkbox"/> 83€	<input type="checkbox"/> 94€
2 months 1/2	<input type="checkbox"/> 98€	<input type="checkbox"/> 110€
3 months	<input type="checkbox"/> 114€	<input type="checkbox"/> 129€
3 months 1/2	<input type="checkbox"/> 134€	<input type="checkbox"/> 152€
4 months	<input type="checkbox"/> 155€	<input type="checkbox"/> 175€
4 months 1/2	<input type="checkbox"/> 190€	<input type="checkbox"/> 215€
5 months	<input type="checkbox"/> 226€	<input type="checkbox"/> 255€
5 months 1/2	<input type="checkbox"/> 262€	<input type="checkbox"/> 295€
6 months	<input type="checkbox"/> 297€	<input type="checkbox"/> 336€
6 months 1/2	<input type="checkbox"/> 333€	<input type="checkbox"/> 376€
7 months	<input type="checkbox"/> 369€	<input type="checkbox"/> 416€
7 months 1/2	<input type="checkbox"/> 410€	<input type="checkbox"/> 463€
8 months	<input type="checkbox"/> 452€	<input type="checkbox"/> 510€
8 months 1/2	<input type="checkbox"/> 482€	<input type="checkbox"/> 544€
9 months	<input type="checkbox"/> 512€	<input type="checkbox"/> 577€
9 months 1/2	<input type="checkbox"/> 541€	<input type="checkbox"/> 611€
10 months	<input type="checkbox"/> 571€	<input type="checkbox"/> 644€
10 months 1/2	<input type="checkbox"/> 589€	<input type="checkbox"/> 664€
11 months	<input type="checkbox"/> 607€	<input type="checkbox"/> 685€

or • "Sérénité" 573€ for 1 year

EFFECTIVE DATE :

The Tranquillité "100" ou "150" and "Sérénité" policies take effect from midnight on the day after your subscription and no earlier than 1st October 2017.

Starting date of your guarantee : Ending date :
No later than 30/09/2018

day month year day month year

YOUR PAYMENT :

By cheque payable to SEM

Cheque N° :

Bank name :

Debtor's name :

In cash By money order

By credit card

To be completed only if you are paying by credit card :

Card N° :

Expiry date : month year

Holder :

Date : day month year Signature :

TERMS AND CONDITIONS, VALIDATION AND SIGNATURE OF YOUR SUBSCRIPTION FORM :

SEM processes, and is responsible for, personal data concerning you for the purposes of managing your request for affiliation, managing and tracking its relationship with its affiliates and fulfilling its contractual obligations (particularly relating to services and the associated accounts), processing claims, organising events, selecting and prospecting, managing payment and debt recovery, managing and monitoring liquidations, carrying out studies and surveys, managing customer satisfaction, applying internal safeguards against fraud, money laundering and the financing of terrorism, managing legal disputes and, more generally, for the purposes of acquitting itself of its legal, regulatory and administrative obligations.

All responses requested on this form are compulsory. If any are absent, your affiliation may not be approved or its processing may be delayed.

The recipients of the data are the authorised departments at SEM, its technical partners and the authorities who are entitled to have knowledge of this data.

In accordance with the provisions of Law 78-17 of 6 January 1978, you have the right, on legitimate grounds, to question, access, rectify or dispute the processing of the data which concerns you, as well as the right to preclude commercial canvassing. These rights may be exercised by sending a letter by post, accompanied by a signed proof of identity, to SMEREP-SEM - Service Informatique et libertés - 16, bd du Général Leclerc - 92115 CLICHY CEDEX.

I agree to receive commercial offers by post and electronically (email, text, MMS, etc.) from SEM and its partners.

In addition, if you do not wish to receive information emails from SEM or its service providers, you can, by following the link contained in each email, terminate the sending of these messages.

In signing this subscription form, you explicitly agree to personal data concerning your health and, where applicable, as the parental authority, data concerning your children as beneficiaries, being processed within the framework of providing the services set out in the contract and for the technical operations which are required for implementing the policies and services and for which this data must be processed, failing which these policies and services cannot be implemented.

I have read the statutes, the SEM insurance regulations and the SEM information notice entitled SEM 2017, which can be consulted at www.mutuelle-sem.fr and are available at SMEREP - SEM receptions or by written request to SMEREP - SEM - Service Adhésions - 16 Boulevard du Général Leclerc - 92115 Clichy Cedex, and I accept their conditions.

In accordance with Article 3 Chapter II Heading I of the insurance regulations, you are entitled to cancel your subscription request by addressing a letter by recorded delivery to SMEREP - SEM - Service Adhésions - 16 Boulevard du Général Leclerc - 92115 Clichy Cedex - within 14 days of the date of your subscription to your SEM cover.

At : Date : **Signature :**

day month year

TO BE ENCLOSED COMPULSORY WITH APPLICATION FORM :

- Your payment by cheque payable to "SEM", by money order or by credit card.
 - A bank account number of the account to credit for the reimbursement of your healthcare charges.
 - An attestation of university attendance or copy of student card for the academic year.
 - A copy of your valid identity card.
 - For the application of your common-law or child(ren) : copy of your family record book and copy of the valid identity card.
- Sending your completed application form to :**
SMEREP-SEM - Service Adhésions - 16 Boulevard du Général Leclerc - 92115 Clichy Cedex or submit it in person to a SMEREP - SEM center (See the list on smerep.fr/contact).