

Personal data

Surname		First name	
Date of birth		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	
Street, house number		Postal code	City
Marital status		Do you have any family members to be included in the insurance? <input type="checkbox"/> Yes (please attach documents) <input type="checkbox"/> No	
Telephone/mobile number		Tax Identification No. (tax ID)	
Pension insurance number ¹		E-mail	
Name at birth		Single insurance number ²	Citizenship
		Place of birth	

Insurance Relationship (please enclose certificate of enrolment with number of semesters)

<input type="checkbox"/> Compulsory insurance <input type="checkbox"/> Voluntary insurance <input type="checkbox"/> Family insurance <input type="checkbox"/> Private insurance		With (name of health insurance scheme)	
My last insurance was			
Name of university/college		I began my studies on	Current semester
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
I am working alongside my studies		My total weekly working hours are	
<input type="checkbox"/> Yes <input type="checkbox"/> No		Self-employment	
I receive financial support under BAföG		I am applying for membership until	

Current/future (gross) monthly income

Member (please enclose documentary evidence)

Self-employment	Employment	Retirement pension	Other work-related benefits and pensions	Other income
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Premiums

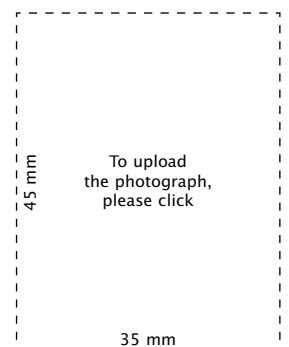
<input type="checkbox"/> Are to be debited (please fully complete and sign the SEPA direct debit mandate form).	<input type="checkbox"/> Spouse's health insurance scheme:
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Photograph for the Electronic Health Card (eGK)

<input type="checkbox"/> I uploaded it on the Internet at: www.ikk-suedwest.de	<input type="checkbox"/> Is available at IKK Südwest	<input type="checkbox"/> I will hand it later
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The photograph for the Electronic Health Card
 You can upload digital images by entering the **Webcode 1000** at: www.ikk-suedwest.de. The photograph for the Electronic Health Card (eGK) is mandatory for all insured persons. Children under the age of 15 do not need to submit a photo. If you submitted a photograph before, it is still stored. In this case, submitting another photo is unnecessary.

Yes, I agree that IKK Südwest provides advice and information to me in writing (including by e-mail) as well as by phone. This consent can be revoked at any time. The revocation has no impact on my insurance with IKK Südwest.



Signature

I declare that I have answered all questions fully and correctly. I will notify IKK Südwest immediately about any changes. I attach the confirmation of termination obtained from my health insurance company.

City, date, signature	Comments
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Data Protection Notice: As a self-governing body incorporated under public law, IKK Südwest, Berliner Promenade 1, 66111 Saarbrücken requires personal data in accordance with § 4 section 1 SGB V (the 5th book of the social security statute book) in order to conduct the insurance relationship. This information is necessary in order to fulfil the functions of health insurance funds. It is collected on the basis of the provisions in the social security statute book and stored on data carriers (§ 284 SGB V, § 94 SGB XI). Your information will be treated in strict confidence and is subject to data privacy. The provision of a telephone number and e-mail address is voluntary. Further information on data processing and on your rights can be found on our homepage in the section 'Information from IKK Südwest relating to the protection of your data' (web code: 18207). Contact details for the data protection officer: IKK Südwest Data Protection Officer, Isaac-Fulda-Allee 7, 55124 Mainz, E-mail: datenschutz@ikk-sw.de

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 1 If pension insurance number is not known, please enter name at birth, place of birth and nationality.
 2 Please refer to your previous Health Card for your single insurance number that is valid for life.