WEST YORKSHIRE POLICE FEDERATION

PCSO's & DO's Joining Form

Surname ……. **Forename(s)** …….....

Address ……...….

……

Post Code ……..... **Home Tel** ……..……..…….

Email Address …….....

Mobile Tel …… **Date of Birth** …….....

Date Joined …… **Role** …..……..……

District …… **Man No.** ……..……...……...……..

Name (printed) ……

I authorise the West Yorkshire Police, until further notice, to deduct the appropriate amounts from my pay, each pay period, in respect of the Charity indicated below:

Student Officer (First 12 months FREE): Yes ☐ No ☐

4039 **POLICE TREATMENT CENTRES**

The Police Treatment Centres treat injured and sick Police Officers & Staff (PCSO's & DO'S) with intensive police-specific physiotherapy and provide psychological support.

Monthly £ 7.80

Signed …… Date ……..

❑ I agree to the use of my personal contact details to enable The Police Treatment Centres to make calls, send texts or emails about the vital work it does for the Police Family, it's fundraising appeals and opportunities to support the PTC. Our Privacy Policy is available at www.thepolicetreatmentcentres.org

Please return to: ***West Yorkshire Police Federation, 3 Eastmoor Road, Wakefield, WF1 3RY***