

*The application for joining must be submitted within six (6) months from the start of the employment relationship or by June 30, 2023, those working in the Finnish units of Skoda Transtech Oy persons who previously could not be included in the health insurance fund. The insurance relationship begins at beginning of the calendar month following the receipt of the application (if the insurance conditions are met).*

**I want to join Otanmäki's health insurance fund.**

**Complete all points:**

<b>Last name</b>	<b>First names</b>
<b>Personal identification number</b> (model 010191-123X)	<b>Bank account number IBAN</b> (model FI22 1234 5678 9100 12)

<b>Local address</b>	
<b>Postalcode and post office</b>	
<b>telephone number</b>	<b>email address</b>

<b>Information about employment at Skoda Transtech Oy</b>	
<b>Starting date of employment</b> _____	
<b>place</b> (Helsinki, Otanmäki, Oulu tai Tampere) _____	
<b>my employment is full-time</b>	<input type="checkbox"/>
<b>my employment is part-time (also state working hours)</b>	<input type="checkbox"/>

*(a copy of the employment contract to be presented upon request)*

**I have never previously left Otanmäki's health insurance fund without ending the employment relationship (after 31.12.2022).**

**I undertake to inform the health insurance fund of what happens in the above-mentioned information changes, periods of unpaid absence and the date of termination of the employment relationship.**

**By joining the health insurance fund, I agree that my data will be stored in the registers of the health insurance fund, my personal data\* is processed to manage the insurance relationship and information the employer is notified of the start of insurance premium collection.**

**I certify that the information I have given is correct:**

<b>Date</b>	<b>Signature</b>
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*The health insurance fund's rules may change, changes will be announced on the insurance fund's website.*

*Following the rules is the customer's own responsibility.*

*\*)For collecting, processing and protecting personal data can be seen on the sickness fund's website [www.otanmaensairauskassa.fi/tietosuoja](http://www.otanmaensairauskassa.fi/tietosuoja).*

Return the form to the Otanmäki health insurance fund (Kokkolantie 1791, 88200 Otanmäki)

phone 040 680 5480 [www.otanmaensairauskassa.fi](http://www.otanmaensairauskassa.fi)