

Reply

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BKK PwC
Burgstraße 1 - 3
34212 Melsungen

Ordinarily
Extraordinary

Application form

I would like to become a member of BKK PwC as of

Personal details and address

First name		Surname	
Address		Postcode / place	
Land line or mobile number		Email address	
Gender		Marital status	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Date of birth	Place of birth	Country of birth	
I have previously been insured as a	Compulsory member Voluntary member	I have been covered by family insurance I have not been covered by statutory health insurance	I have children yes no
<input type="text"/>	<input type="text"/>	12 months or longer since when	Less than 12 months
Health insurance number	insured with		

My regular gross income including one-off payments exceeds the annual remuneration limit (2022 = € 64,350.00)

I am taking up employment in Germany for the first time.

I am

a salaried employee a trainee a pensioner self-employed a student an intern unemployed

Employer

Start of occupation

Privacy notice: By providing your landline or mobile number, you enable us to contact you quickly and easily if questions arise. You disclose them voluntarily and may revoke them at any time. By completing the fields, you agree that BKK PwC stores and uses the data and that the change to BKK PwC is initiated. You can find more information on our homepage at <https://www.bkk-pwc.de/datenschutz>.

Date Signature



Find out more
about us



Für gewöhnlich | außergewöhnlich