

CSMS DECLARATION: REIMBURSEMENT OF MEDICAL EXPENSES



Please note:
To be sent to the CSMS within 60 days!

1. Details

Fields marked with an * are mandatory

Identity of the club		Accident number (for administration use only): <input type="text"/>	
Name of the club: *	<input type="text"/>		
Name of the Federation: *	<input type="text"/>		
Name of signatory: * (club official)	<input type="text"/>		
Identity of the injured party			
Name: *	<input type="text"/>		
First name: *	<input type="text"/>		
Licence number: *	<input type="text"/>	Date of birth: *	<input type="text"/>
Number, street: *	<input type="text"/>		
Town/City: *	<input type="text"/>	Postcode: *	<input type="text"/>
Country: *	<input type="text"/>		
Landline number: *	<input type="text"/>	Mobile phone: *	<input type="text"/>
Email: *	<input type="text"/>		
Account number (IBAN): *	<input type="text"/>		
Date of the sports accident: *	<input type="text"/>		

2. Signature (of a club official)

The signature below certifies the accuracy of data provided

Place: *	<input type="text"/>	Date: *	<input type="text"/>
Signature: *	<input type="text"/>		

3. Doctor's details

Fields marked with an * are mandatory

Identity of the doctor

Name: *

First name: *

Medical certificate

Start date of the treatment: *

Diagnosis: *

Is there an incapacity for work? * Yes No

If yes, for how long: *

4. Doctor's signature

The signature below certifies the accuracy of data provided

Place: *

Date: *

Signature: *

Data protection

Data protection - Consent to the processing of personal data

I authorise the Caisse de Secours Mutuels des Sportifs to record and process my personal data as stated on this form for a minimum period of 10 years in order to enable the reimbursement of health care costs incurred as a result of my sports accident and not reimbursed by health insurance, a mutual insurance company or private insurance. Depending on the nature of the accident, the data may be kept for longer than this period.

Providing personal data is necessary to process the application. This information must be accurate and reflect the reality of the situation, otherwise the application cannot be accepted.

The data processed, with the exception of medical data, is communicated for verification purposes to the sports federation to which you belong. The processed and anonymised data will be used for statistical purposes.

The legal rules on the protection of personal data, in particular the rights of the persons concerned by the processing operations carried out (right of access to data, right to rectification of data, right to erasure of data, right to object or right to require restriction of processing), are applicable under the relevant conditions and subject to the exceptions and derogations provided for. Claims can be made directly to the Caisse de Secours Mutuels des Sportifs. Any complaint or request relating to the rights of the persons concerned may be referred to the National Commission for Data Protection (CNPD).

Signature of the injured person or of their legal representative if the injured person is a minor