

MEMBERSHIP WITHDRAWAL NOTIFICATION FORM

SCHEME MEMBERSHIP DETAILS

Name of Scheme :		
Name of Member :		Member No. :
Date of Birth : dd – mmm - yyyy	Date joined Scheme : dd – mmm - yyyy	Last Month of Contribution : mmm - yyyy
National ID/Passport Number:	Member's PIN:	

MEMBER'S CONTACT DETAILS

P. O. Box :	Code :	City/Town :
Email :		Phone(s) :

MEMBER'S BANK ACCOUNT DETAILS

Name of Bank :	Account Name :
Account Number :	Branch :

REASON FOR EXIT

Death Normal Retirement Early Retirement Late Retirement Ill-health Retirement
 Resignation Withdrawal Termination Withdrawal Retrenchment Withdrawal Other : (please specify)

(here is to submit that we may be reverting to discuss further with you your withdrawal options)

WITHDRAWAL OPTIONS BEFORE RETIREMENT

Employee Benefits	<input type="checkbox"/> Pay a cash lump sum refund	<input type="checkbox"/> Transfer to a Registered Scheme
Vested Employer Benefits	<input type="checkbox"/> Pay a cash lump sum refund of % (max 50%)	<input type="checkbox"/> Transfer to a Registered Scheme

Would you like to transfer your benefits to the Britam Personal Retirement Scheme? YES : NO :

Transfer to other Schemes:	Name of Scheme :	
	Name of Bank :	Account Name :
	Account Number :	Branch :

DECLARATION BY MEMBER

I understand that the Trustees of the scheme have the final discretion on the settlement of benefits from the Scheme and will be guided by the provisions of the Scheme's Trust Deed and Rules. I also confirm that the bank account details given above are correct and discharge the Trustees of any further liability that may arise out of using the indicated information for settlement of my benefits.

Signed this day of in the year	Signature of Member:
--	----------------------

FOR OFFICIAL USE BY THE EMPLOYER/TRUSTEE/ADMINISTRATOR

Confirmation for settlement	
Name and Designation of Authorized Signatory:	Date & Stamp: dd – mmm - yyyy
Signature of Authorized Signatory:	