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PERSONAL PENSIONS SCHEME - TIER 3

COMPLETE WHERE APPLICABLE USING BLOCK LETTERS OR TICK

NEW MEMBER ENTRY FORM

A. Personal Details								
Surname:								
First Names:					Sector: Formal	Informal		
Social Security Number:			Date of Birth:		YYY	Gender: F M		
ID Type:	ID No.:			Nationality:				
Marital Status: Married	Single Divorced	Widowed	Separated	Other (specify)				
Occupation:			Staff ID:					
Telephone/Cell Number:			2					
Residential Address:								
Postal Address:								
Email Address:								
Hometown:			Region					
B. Contribution Information								
Contribution Amount (GHS):								
Contribution Frequency: Monthly Weekly Daily Others (specify)								
Mode of Contribution: Bar	nk Deposit MTN Mobi	le Money	Payroll Deduction	ons Direct Deb	it Others (sp	ecify)		
C. Employer Details (Required for payroll deductions)								
Employer:								
Employer Address:								
Business Location:			Telephone N	umber:				

D. Beneficiary Nomination

Surname	First Names	Date of Birth	Relationship to Member	Telephone No.	% Share

E. Rules, Declaration and Signature

RULES

- Registered Scheme:- The Metropolitan Provident Fund Scheme (Ghana), a voluntary fully funded and privately managed provident fund and personal pension scheme as set out in section I(c) of the Act;
- Fees:- 2.5% p.a. of net asset value of fund under management. This comprises administration fee, custodial fee, regulators fee and fund management fees;
- Withdrawal:- 50% withdrawal allowed after every 3 years. Full withdrawal allowed only on termination of scheme membership;
- Vesting Date:- Contributions scheme shall vest to a member as accrued benefits immediately it is paid to Metropolitan Pensions Trust.

DECLARATION

- I duly mandate my employer to deduct and make contributions on my behalf into my voluntary pensions account with Metropolitan Pensions Trust.
- I agree to be bound by the terms of the Metropolitan Pensions Trust voluntary pensions scheme and governing rules set by members.
- I declare that the information provided on this application form is accurate and true as at date of signing and I would notify Metropolitan Pensions Trust immediately if any of this information changes.

Signature:	Date: D M M Y Y Y Y