



**Member Enrolment Form** (Please submit with a copy of valid Government issued ID for new Member)

**1. Employer Information**

Company Name:	Employer Number:
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**2. Other Plan Information**

Have you ever had an account with Silver Thatch Pensions in the past?      Yes      No

Do you have pension assets with another pension plan?      Yes      No      If 'Yes', which plan/plans?

**3. Member Information**

Mr.    Ms	Member Last Name	Member Maiden Name	Member First Name	Member Middle Name	Date of Birth (MM/DD/YY)
Mrs.   Dr.					

**4. Spouse Information**

Are you married?      Yes      No      Name of spouse:      Date of Birth:

**5. Beneficiary Information**

Beneficiary Last Name	Beneficiary First Name	Relationship	Date of Birth (MM/DD/YY)	Percentage (%)

Please refer to your member handbook for more information on what will happen to your pension in case of your death.

**6. Contact Information**

Mailing address:

Email address:	Telephone:
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**7. Contribution Information**

Estimated annual income range (USD)	<20k	20k-25k	25k-30k	30k-40k	40k-50k	50k-60k	>60k
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Start date of employment:	Start date of contribution:
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Immigration Status (Please select one)	Caymanian Work Permit	Caymanian Status Holder Key Employee	Permanet Resident w/ Right to Work Spouse of Any of the Above
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Please inform Silver Thatch Pensions as soon as possible of any changes to the above details.

Signed by Employee:	Date:
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**Employer Confirmation**

I    We hereby confirm that I / we have provided the above employee with the Member Handbook or directed the employee to download it at [www.silverthatch.org.ky](http://www.silverthatch.org.ky).

Signed by Employer:	Date:
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This form must be accompanied by a copy of a valid photo ID (Driver's License, Passport, Voter's ID or Government ID).

**For Office Use Only**

Signed by (Admin):	Original    Electronic	Signed by (Reviewing Admin):
Date:		Date: