



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

1. Employer Information

Company Name: _____ Employer Number: _____

2. Other Plan Information

Have you ever had an account with Verdant Isle Pension Plan 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: _____

7. Contribution Information

Start date of employment: _____ Start date of contribution: _____

Immigration Status (Please select one) Caymanian Permanent Resident w/ Right to Work
 Work Permit

Please inform Verdant Isle Pension Plan as soon as possible of any changes to the above details.

Signed by Employee: _____ Date: _____

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.verdantisle.org.ky.

Signed by Employer: _____ Date: _____

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: _____