



**PENSOL PERSONAL PENSION SCHEME
MEMBERSHIP ENROLMENT FORM**

NOTE: ALL INFORMATION SHOULD BE WRITTEN LEGIBLY AND BOLDLY IN CAPITAL LETTERS

PASSPORT PHOTO

ENROLMENT NUMBER:

NAME OF CONTRIBUTOR		Surname		First name		Other Names	
DATE OF BIRTH		SEX	NATIONALITY	ID TYPE		ID NUMBER:	
GHANA CARD NUMBER:		PHONE NO:		TELEPHONE:		MARITAL STATUS:	
MONTHLY CONTRIBUTION GH¢		MODE OF PAYMENT SOURCE <input type="checkbox"/> BANK <input type="checkbox"/> MOMO <input type="checkbox"/>		ACCOUNT DETAILS: BANK NAME: ACCOUNT NAME:		ACCOUNT NUMBER:	
COUNTRY OF BIRTH:		RESIDENTIAL ADDRESS/ GPRS:					
E-MAIL ADDRESS:				HOMETOWN			
NAME OF EMPLOYER				EMPLOYER'S ADDRESS			

BENEFICIARY(S) NOMINATIONS

NO.	NAME OF BENEFICIARY	DATE OF BIRTH	RELATIONSHIP	PERMANENT ADDRESS/ GPRS	CONTACT	%
TOTAL						100%

FINGERPRINTS	
LEFT THUMB PRINT	RIGHT THUMB PRINT

DECLARATION BY CONTRIBUTOR

I declare and clarify that:

1. The facts herein stated are accurate and true
2. I am duly informed and to my full understanding that I will be liable to prosecute for any false declaration herein or hereafter made with the scheme.

FOR OFFICAL USE ONLY

I certify that this form was filled in my presence by the above contributor

SIGNATURE.....

DATED:

NAME OF ENROLMENT OFFICER

SIGNATURE

DATE