

EMPLOYEE APPLICATION FORM

Member Name:

Home Address:
PLEASE USE BLOCK CAPITALS

Email Address:

Date of Birth: Phone Number:

Marital Status:

Company Name:

I note my funds will be invested in the DEFAULT FUND Yes No
 (Please refer to www.cers.ie/funds for up to date information on the fund choices available to you).
 If NO, I attach an **Investment Instruction Form** outlining my chosen investment choice.

I HEREBY AUTHORISE THE COMPANY TO MAKE THE NECESSARY DEDUCTIONS INDICATED BELOW FROM MY SALARY UNTIL FURTHER NOTICE.

Signature: Date:

TO BE COMPLETED BY EMPLOYER

Date of Joining Company: Annual Salary:

Date of Joining CERS: Category of membership:

CONTRIBUTIONS TO BE PAID EACH MONTH

Employee fixed amount / % of Salary per month:

Employer fixed amount / % of Salary per month:

Signature: Position in Company:

Date:

Please note: This form should be sent to CERS and a copy should be retained by the company.