

New Entrant Form

A : Personal Details

Fund name			
Title and Initials		Date of Birth	
Full Names and Surname			
Gender		ID Nr / Passport Nr	
		Country Issued	
Branch/Dept Name		Marital Status	
Employee Number		Tax Number	

B : Member Details

Joined Fund			Joined Company		
Pensionable Salary	R		Risk Salary	R	
Occupation			Category		
South African Citizen	☐	☐	South African Resident	☐	☐

C : Contact Detail

Residential Address		Postal Address	
Contact Number(s)	Home		Cell
E-mail address			

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D : Transfer from previous Fund

1. Will you be transferring a benefit from your previous fund?

☐ ☐

If yes, please provide details below

Fund Name

Contact Person

Contact Number

E-mail address

2. Do you have any paid-up benefits with any other Retirement Funds?

☐ ☐

If yes, please provide copies of all such Paid-up certificates

E : Declarations

1. Declaration by the member

I, the undersigned member, hereby confirm that the information given herein is true and correct.

I understand that GQM requires access to my personal information in order to administer my retirement fund. I consent to my employer to provide GQM with the necessary information.

Member's Signature

Date

2. Declaration on behalf of the Employer

I/We declare on behalf of the employer that the above-mentioned employee qualifies for membership in terms of the rules of the fund and that the particulars given above are true and correct.

Employer's Signature

Date

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**Employer Authorised Signature
Name and Capacity**

Company Stamp

Signatory

Date

Disclosure of information

GQM and the fund understand privacy and the confidentiality of personal information. If required, we may disclose your personal information to 3rd parties. These 3rd parties are insurance and service providers who are involved in the delivery of products or services to you. The same strict confidentiality standards are imposed on 3rd parties. Signing of this form confirms acknowledgement and consent to the above. We will treat personal information with caution and have security measures in place to protect it. The information provided will be used for intended purpose only. Such purposes include fund and related communications. We may also disclose your information:

- Where we have a duty or a right to disclose in terms of law or industry codes;
- Where we believe it is necessary to protect our rights.

Where the person signing this document is someone other than the person whose personal information is being supplied, such signatory confirms that the necessary consent has been obtained to supply personal information and that the information is true and correct.