UK Defined Contribution Pension Plan Upgrade Form					
This form should be completed electronically and submitted to People_Admin@rnli.org.uk.					
If you are a member of the ` Pre-May 22 Crew Pension Group'* please ask People Admin to send you a `Pre-May 22 Crew Pension Group' Upgrade form to complete instead.					
*Members of the ` Pre-May 22 Crew Pension Group' are in an employed crew or Station Manager role (Chiswick, Gravesend or Tower) and have an employment start date in that role before 1 May 2022 and remain in one of those roles.					
Personnel No.	If you are a seasonal employee or apprentice please tick this box:				
First Name	Middle Name(s)				
Surname	Date of Birth				
Home Address	Post Code				
Town	County				
Home phone	Mobile phone				
Email address	National insurance No.				

Section 2: Please complete the below section if you are an RNLI employee who joined the RNLI UK Group Personal Pension Plan at the minimum percentage and you want to increase your contribution.

I would like to increase the contribution that I make to the RNLI Group Personal Pension Plan. Please therefore change my contributions to the following:

Employee contribution	Plus RNLI Contribution of
3%	11%
4%	12%
5%	13%
6%	14%
7%	15%
8%	16%
Enter amount above 8%	16%

Contribution options

I understand that my contributions will be paid by **Salary Exchange** unless I am paid on completion of timesheets, if I am an apprentice, or if I am over state pension age, or I am on maternity / adoption / extended paternity leave, or I sign the opt-out of Salary Exchange section on the reverse of this form - in which case I will remain a contributory member, at the contribution level selected above.

Life Cover - this is an additional employee benefit, provided by the RNLI

If you remain on the minimum 2% pension contribution, your beneficiaries will be entitled to a life cover lump sum payment equivalent to 2 x your annual salary while you are an active member of the pension plan and an RNLI employee.

If you increase your pension contribution above the 2% minimum, you will have life cover up to 8 x your annual salary. Certain conditions apply. You may be required to complete a Medical Underwriting Form (MUF), if you join the pension scheme late or increase pension contributions from 2% significantly after the date that you join the pension scheme. People Admin will email you a MUF form, if you need to complete one.

I hereby authorise my employer to deduct the amount detailed on this form from my pensionable salary to contribute into the Plan, from the next available month/pay period.

Signed (enter name)

Date

See Section 3 for Salary Exchange Opt-Out, otherwise please submit to People Admin. For any queries refer to the UK member handbook on the RNLI Pension website or contact People Admin.

Section 3: Salary Exchange Opt-Out

If you wish to opt out of the Salary Exchange arrangement, please also complete the following declaration

I have decided that I do not wish to participate in Salary Exchange. I do wish to continue to contribute to the Plan administered by Aviva as a Contributory member. I therefore confirm that:

I wish to opt-out of Salary Exchange. My basic salary will not be altered as I will not be participating in Salary Exchange.

I wish to continue contributing to the Plan from my net pay and, for the avoidance doubt, authorise the Employer to deduct my member contributions to the Plan from my net pay.

I will remain responsible for reclaiming any higher rate tax relief due on my personal pension contribution, as these contributions are deducted from my pay net of basic rate tax.

Please only sign below if you wish to opt-out of Salary Exchange.

Signed (enter name)

Date

People Administration Team, RNLI, West Quay Road, Poole, Dorset, BH15 1HZ