

MEMBERSHIP REGISTRATION

THE PENSION FUND (1969) OF THE PENTECOSTAL ASSEMBLIES OF CANADA

2450 Milltower Court
Mississauga, ON
L5N 5Z6

CONFIDENTIAL

Instructions:

Please complete as required both by member and employer.

Please note that proof of PAOC church membership is also required, if you do not have PAOC Credentials.

When completed and signed, please fax or mail to the International Office, c/o K. Maier (Fax # 905-542-7313).

Please Print

Today's Date: _____

Current Address: _____

(Including postal code)

Applicant Name: _____

Date of Birth: _____

S.I.N.: _____

Beneficiary Name: _____

Relationship: _____

If relationship is "Spouse" please include the following:

S.I.N.: _____

Date of Birth: _____

Date of Marriage: _____

Membership in the Plan:

Plan membership will commence when this form

has been received by The Pension Fund - **and contributions have been received.**

Applicant Signature: _____

(Must be Signed)

Employer Section

Employer Name: _____

Please indicate employee date of hire: _____

Please indicate date pension fund contributions were first deducted from employee

Payroll : _____

Employer Signature: _____

(Must be Signed) - Chair of Church Board OR Board Secretary OR Board Treasurer

Additional Form Required: A Participating Employer Agreement will also need to be submitted if not already done.

Complete forms and other important information are available at www.paoc.org under the "Pension Fund" link.