PORTCULLIS PENSION PLAN
Application for Membership

PERSONAL DETAILS	
Full Name:	**Date of Birth:** **Sex:** **M / F**
NI number:	**Selected Retirement Age:**
Employment start date:	**Employing MP's name:**
Your address:	
	Postcode:

Contributions	**Employer**		**Personal (Voluntary)**	
	Axa	% pay	Axa	% pay
	Norwich Union	% pay	Norwich Union	% pay
	Total	10% pay	Total	% pay

AXA Investment Choice		**NORWICH UNION** Investment Choice	
Fund	**Percentage**	**Fund**	**Percentage**
Cash/Deposit	%	Cash/Deposit	%
Fixed Interest	%	Fixed Interest	%
Property	%	Property	%
Ethical	%	Ethical	%
Lifestyling	%	Balanced Lifestyle	%
	%	Opportunity Lifestyle	%
	%	Cautious Lifestyle	%
	%		%
	%		%
	%		%
	%		%
	%		%
	100%		**100%**

Signature ……..... Date …….……..……