



The Greater Gwent (Torfaen) Pension Fund

LOCAL GOVERNMENT PENSION SCHEME

Application to Join the LGPS

Your Personal Details

Your Name:

Your Address:

Post Code:

Your Employment Details

Name of Employer:

Post Title(s):

Post Reference:

Employee/Payroll No:

NI Number:

I wish to become a member of the Local Government Pension Scheme (LGPS).

Please bring me into the LGPS from the next available pay day.

Signed:

Date:

PLEASE FORWARD THIS FORM TO YOUR EMPLOYER'S PAYROLL TEAM