



Opting-Out Enquiry Form

From:

Please complete the following using black ink:

Member name

Member number

National Insurance number

Date of birth

Address

Postcode

Telephone number

Email address

I want to investigate opting-out of the TfL Pension Fund. Please provide me with more information.

Signature

Date

Please return this form to: TfL Pension Fund, 4th Floor, Wing over Station, 55 Broadway, London, SW1H 0BD.