

Mitchells & Butlers Pension Plan

Application Form

Please complete this form and return it to:

Louise Sullivan,
Employee Benefits Advisor,
Mitchells & Butlers plc,
27 Fleet Street,
Birmingham B3 1JP.



Personal details

Title: (please tick) **Mr** **Mrs** **Miss** **Other** (please specify)

Surname: **First names:**

Date of Birth: **National Insurance No:**

Home address:

 Postcode:

Telephone No:



Your contributions

Remember – maximising your Core Contribution means maximising your Matching Credit.

Your Core Contribution (tick one box):* 4% 5%

Optional: Additional Voluntary Contribution (AVC):** % or £

*Core Contributions and AVCs are based on your Plan Pay which is your basic 4 weekly pay (unless you have been told otherwise).

** AVCs will be deducted from your pay with your Core Contribution.

You will automatically participate in Salary Exchange; this may affect your benefits if you leave the Company within the first 30 days of joining DC Choice.

Contact Payroll Control (payroll.control@mbplc.com) to opt-out of Salary Exchange.



Your investment choice

When you join the Plan, your savings will automatically be invested in the default investment option (the Default Pathway Fund).

If you would prefer to make an alternative investment choice, please choose from the options below (tick one box):



Annuity Target Pathway Fund



Cash Target Pathway Fund

You can find more information on your investment options in the Investment Guide on the DC Choice website.

You can change how your account is invested at any time through Legal & General's online Manage Your Account service.



Declaration

I confirm I have read the DC Choice Overview

I apply to the trustees to join DC Choice based on the terms of the Trust Deeds and Rules.

I also authorise the Company to deduct my personal contributions from my pay as set out in this application form.

By signing this form you consent to the trustees using the personal data you provide to them in the administration and operation of DC Choice. Please refer to your Plan Guide for more information on the Plan's Data Protection Policy and how data may be used.

Full name:

Signature:

Date:

