

Leave Pace DC

Please complete all fields below if you wish to leave Pace DC and have been a member for more than one calendar month. If you have been a member for less than one calendar month and wish to opt out of Pace DC, you should do so through **WorkSave Choice**.

This form is not for use if you wish to move between contribution rates.

Please complete in **BLOCK CAPITALS**:

Employee number

NI number

Surname First name(s)

Email address

Please indicate below that you wish to leave Pace DC. This will be effective from the next available payroll run.

Please note: that on ceasing your membership your regular additional voluntary contributions will also stop.

Please read carefully the benefits you will lose on leaving Pace DC.

I confirm that I wish to leave Pace DC and understand that I will lose any benefit associated with active membership of the scheme, including death in service benefits.

I understand that, by completing and submitting this form, I'm agreeing to leave Pace DC.

Please note that if there is any conflict between the information contained in or contribution rates implied by this form and the Pace Rules, the Rules will be overriding.

If you have any questions please contact the Pace DC helpline on 0345 070 1148.

Signature

Date / /

**Please email this form to hrsupport@co-operativebank.co.uk, or post it to:
Co-operative Bank People Team, 5th Floor, 1 Balloon Street, Manchester, M60 4EP.**