

MEMBER CONTRIBUTION FORM

- For use with:**
- Hornbuckle Mitchell SIPP
 - Hornbuckle Mitchell Private Pension
 - Private Pension
 - Hornbuckle Mitchell FIPP
 - Freedom SIPP

Please complete this form in BLOCK CAPITALS and black ink and return it to: Embark Pensions, Provincial House, 37 New Walk, Leicester, LE1 6TU. If you need assistance in completing this form, please call our Customer Services team on 0116 366 8600.

Complete this form if you are making either a single contribution to your pension, or setting up or amending regular contributions.

1 MEMBER DETAILS

Title:

Forename(s):

Surname:

Address:

Postcode:

Date of Birth:

| D | D | M | M | Y | Y | Y | Y |

Pension Number:

Email:

National Insurance Number:


If you do not have a National Insurance number please tick here.

Lifetime Allowance Protection:

If you hold Enhanced or Fixed Protection any contribution paid to your pension will result in the loss of your protection. You should speak to your financial adviser.

Money Purchase Annual Allowance (MPAA):

Have you triggered the Money Purchase Annual Allowance (MPAA)? Yes No

 If 'Yes' please supply us with your written confirmation provided by the scheme administrator if other than Embark Pensions.

2 EMPLOYMENT STATUS

I am (please tick one):

Employed

Self-employed

A child under the age of 16

A pensioner

Other

If you have selected 'Other' from the list above, please confirm which of the following best describes your status:

Caring for one or more children aged under 16

Caring for a person aged 16 or over

In full time education

Unemployed

Other

If you have selected 'Other', please provide details:

6 MEMBER DECLARATION

I declare that in any given tax year the total contributions to any registered pension schemes in respect of which I am entitled to tax relief under section 188 of the Finance Act 2004 will not exceed the higher of (a) the basic amount or (b) my relevant UK earnings for that tax year, within the meaning of section 189 of the Finance Act 2004.

I declare that the declaration I have given above is, to the best of my knowledge and belief, correct.

I declare that the particulars I have provided in this application are, to the best of my knowledge and belief, correct and complete.

I declare that I will give notice to Embark Services Limited if an event occurs as a result of which I am no longer entitled to tax relief for my contributions pursuant to section 188 of the Finance Act 2004, and I will give that notice no later than the later of (a) the 5th April in the year of assessment in which the event occurs and (b) the date which is 30 days after the occurrence of the event.

I am the member named in section 1.

I am making these declarations on the member's behalf, and I am:

The parent or guardian of the member.

The member's attorney or receiver, or another person managing and administering the member's affairs.

A person with power of attorney in relation to the member's affairs.

I have received financial advice in relation to this transaction:

Yes

No


Member Signature: 


Print Name:


Date:

| D | D | M | M | Y | Y |



 0116 366 8600

 Provincial House, 37 New Walk,
Leicester, LE1 6TU

 clientservicing@embarkpensions.co.uk

 embarkpensions.co.uk

Hornbuckle Mitchell Trustees Limited are the trustee for the Hornbuckle Mitchell SIPP, the Hornbuckle Mitchell Private Pension, the Private Pension and the Hornbuckle Mitchell FIPP. Avalon SIPP Trustees Limited are the trustee for the Freedom SIPP.

Embark Pensions is a trading name of Embark Services Limited, a company registered in England (No. 02089815) with its registered office at 100 Cannon Street, London, EC4N 6EU. Embark Services Limited is authorised and regulated by the Financial Conduct Authority (Registration no. 120820). Embark Services Limited is a wholly owned subsidiary of Embark Group Limited (No. 03578067) with its registered office at 100 Cannon Street, London EC4N 6EU.