



Employer:

Postal address:

Postcode:

Employer contacts

HR contact with Employer

Name: _____ Position held: _____

Telephone number: _____ Email address: _____

Payroll contact with Employer

Name: _____ Position held: _____

Telephone number: _____ Email address: _____

Bulletins and updates will be sent by email to all individuals listed above. If you require bulletins and updates to be emailed to any other individuals insert email details below:

Name: _____ Email address: _____

Name: _____ Email address: _____

Name: _____ Email address: _____

External contacts details

HR contact if external provider Company: _____

Address: _____

Name: _____ Position held: _____

Telephone number: _____ Email address: _____

Payroll contact if external provider Company: _____

Address: _____

Name: _____ Position held: _____

Telephone number: _____ Email address: _____

Independent Medical Practitioner Contact Company: _____

Address: _____

Name: _____ Position held: _____

Telephone number: _____ Email address: _____

We understand, as the employer, that it is our responsibility to supply information to YPS and not the responsibility of any third party bureau service. However, as the employer we ***authorise / *do not authorise** YPS to contact our third party bureau services listed above if required.

*Delete where applicable

Authorising signature

Name

Date

Administered by:

In partnership with:



Your Pension Service

PO Box 100, County Hall, Preston, PR1 0LD

