

Active Number _____

BURLINGTON EMPLOYEES' RETIREMENT SYSTEM

MEMBERSHIP BLANK

To the Retirement Board:

In accordance with the provisions of the law governing the operation of the Burlington Employees' Retirement System I hereby certify the following for my record as a member of the System.

1. Name _____ 2. Department _____
3. First day worked _____ 3a. Email address: _____
- 3b. Home Phone _____
4. Social Security Number _____ 5. Sex: Male Female
6. Home address _____
7. Marital Status: Single Married Widowed Divorced
8. Date of Birth _____, as documentary evidence of which I submit the following (copy of Birth Certificate or Vermont Driver's License): _____
9. I hereby authorize deductions from my compensation as provided in the law, ordinance, policy, or union contract.
10. I hereby designate _____ who resides at _____ and whose relationship to me is _____ as my beneficiary, and reserve the right to revoke said designation at any time by written notice to you.

11. My family consists of the following members:

	NAME	Date of Birth		
		Month	Day	Year
Spouse Children younger than 21 years				

(continued over)

12. Following is an accurate and complete statement of any prior membership in the Burlington Employees' Retirement System. (If none, so state)

DEPARTMENT	FROM			TO		
	Month	Day	Year	Month	Day	Year

(Signature of employee)

Note to applicant: After filling in all the information requested on the Membership Blank, you should acknowledge it before a Notary Public.

State of Vermont

County of Chittenden

On this _____ day of _____, 20_____, personally appeared before me the said named _____ to me known and known to me to be the person described in and who executed the foregoing instrument and he (or she) acknowledged that he (or she) executed the same.

(Seal) _____
(Notary Public)

Please return this form to the Retirement Office at 179 South Winooski Avenue.
