



For ARBS use only

# Association of Retirement Benefits Schemes

## Membership Application and Details Form

To: Association of Retirement Benefits Schemes  
Old Mutual Building, 3<sup>rd</sup> Floor, Corner Mara/Hospital Roads, Upper Hill  
PO Box 10285-00100  
Nairobi

I/We apply for Membership of the Association of Retirement Benefits Schemes and give below the details:

Details of Member: (Note 1)	Full Name of Member: .....
	Address: .....
	..... Post code: .....

Type of Membership: (Delete as applicable)	Scheme/Sponsor/Service Provider/Adviser/Other	Nominated Person (Note 2)	Name: .....
Number of Trustees	Founder nominees: .....		Email: ..... Cellphone: .....
Other Details: (Note 4)	Member nominees: .....		Position: .....

**Section A** (to be completed by applicants who are Schemes or Sponsors)

Number of Scheme Members: Actives: ..... Pensioners: ..... Deferreds: ..... Value of Scheme Fund: Kshs.....

Type of Scheme: DB/DC Pension/DC Provident      RBA Registration Number: .....

**Section B** (to be completed by applicants who are not Schemes or Sponsors)

Please state the nature of your business: .....

Authorised Signature of Applicant ..... Date .....

### Notes on completion of Membership Application and Details Form:

1. Please state the full name of the registered member (scheme, sponsor etc) and physical and postal address
2. The Nominated Person is the person to whom all correspondence from the Association should be addressed (normally the person who has the greatest involvement in matters related to retirement benefits schemes).  
**Please provide the name and position (e.g. Trustee/Trust Secretary/HR Manager) of the Nominated Person and attach a business card. Please also advise us in writing each time there is to be a change in the Nominated Person.**
3. The details requested in Section A are required to enable us to build as complete a picture as possible of the Schemes represented in our Membership.
4. The details requested in Section B are required to enable us to assess the scope of our Membership, outside of Schemes and Sponsors.

**Please forward your completed application form to the Executive Secretariat at the address show above, together with a cheque payable to Association of Retirement Benefits Schemes for Kshs 17,500/= (covering: the registration fee – Kshs5,000.00 and first year’s membership subscription – Kshs12,500.00) ( if joining after 1 July pay registration fee plus ½ membership subscription – i.e. Kshs11,250)**