



## Opting-Out Enquiry Form

### Member Details

*Please complete the following using black ink*

Member name

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Member number

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National Insurance number

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Date of birth

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Address

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Postcode

---

Telephone number

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Email address

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I want to investigate opting-out of the TfL Pension Fund. Please provide me with more information.

Signature

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Date

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**Please return this form to:**

**TfL Pension Fund, 4<sup>th</sup> Floor, Wing over Station,  
55 Broadway, London, SW1H 0BD.**

