

Pension Scheme Account Opening Request *(continued)*

7. DECLARATION AND SIGNATURE(S) *(continued)* Please note all trustees must sign below

Member Trustee(s)

Print name

Robert James Smith

Signature

[Handwritten Signature]

Date 30/9/22

Print name

Matthew Yates

Signature

[Handwritten Signature]

Date 30/9/22

Print name

Signature

Date

Print name

Signature

Date

Print name

Signature

Date

Print name

Signature

Date

OPEN 7 DAYS

Monday - Friday: 8am - 8pm • Saturday: 8am - 6pm • Sunday: 11am - 5pm

Local Call Centre: 0345 08 08 500 • [metrobankonline.co.uk](https://www.metrobankonline.co.uk) • [MetroBank_Help](#)