Waiver of Participation in Global Methodist Church Retirement Plan

The Global Methodist Church offers a 403(b) Retirement plan ("the Plan") administered by GuideStone to appointed pastors serving in a 50% appointment(s) or greater. The Local church(s) contributes 5% of the pastor's pensionable earnings plus matches up to 5% of the pastor's personal contribution to the Plan.

Pastors may elect to waive participation and thereby NOT be set up with GuideStone and NOT receive matching contributions.

Pastors may later elect to revoke this waiver prospectively upon effective notification of the Local Church, Presiding Elder, Conference Superintendent and Conference Treasurer.

Pastor electing to waive participation in the Plan.

Name: _____

Address: _____

Birth Date: _____

Phone Number(s) _____

Appointment(s): _____

Annual Pensionable Earnings: $_____

Senior Status: YES NO (circle one)

Circuit(s): _____

Conference: _____

Effective Date of Waiver (date of appointment): _____

Reason for requesting to waive participation in the plan:

_____

_____

Waiver of Participation

As of the Effective Date of this Waiver, I hereby elect not to participate in the Global Methodist Retirement Plan as administered by GuideStone. I understand that because of this election, no participant or local church contributions will be remitted to this plan by my local church on my behalf for the period for which I waived participation. This waiver is binding on me, my heirs, my personal representatives and all other persons who might otherwise claim benefits because of my participation in the plan.

Participant Signature: _____ Date: _____

Sworn before me on this _____day of _____, 20_____

Signature of Notary _____

Notary Seal

Participant: After completion, please provide the original signed and notarized form to your Presiding Elder who shall forward it to the Conference Office.

Accepted By:

Presiding Elder (Print Name): _____

Signature: _____ Date: _____

Conference Superintendent (Print Name): _____

Signature: _____ Date: _____

☐ Original to be kept on file at the Conference Office.

☐ Copy to be kept on file at the GMC Benefits Office.

☐ Copy to Pastor electing to waive participation in the Plan

☐ Copy to Presiding Elder

☐ Copy to Local Church