



# Main contact registration form

| Employer name and location code |  |  |
|---------------------------------|--|--|
| Employer address                |  |  |

Important: make sure you read the guidance note on Managing your WYPF contacts before completing this

#### form. Strategic contact (must be at the employer)

| Name      | Address if different from above |
|-----------|---------------------------------|
| Job title |                                 |
| Phone     | Specimen signature              |
| Email     |                                 |

## Administration contact (for day to day enquiries and admin matters)

| Name      | Address if different from above |
|-----------|---------------------------------|
| Job title |                                 |
| Phone     | Specimen signature              |
| Email     |                                 |

## Finance contact (monthly return and exception reports contact)

| Name      | Address if different from above |
|-----------|---------------------------------|
| Job title |                                 |
| Phone     | Specimen signature              |
| Email     |                                 |

#### Contact at third-party payroll provider (only used for authorising access for additional payroll staff)

| Name      | Address if different from above |
|-----------|---------------------------------|
| Job title |                                 |
| Phone     | Specimen signature              |
| Email     |                                 |

| Date signatures valid from | Signed (by current authorised signatory) |
|----------------------------|--|
|                            |  |