

This form is to be completed if you wish to waive participation in the 401(a) Retirement Plan *before* you become eligible to participate. You may waive participation if you satisfy all of the following:

- You are not currently eligible to participate in the 401(a) Retirement Plan;
- You were age 60 or older when you first became employed with a YMCA;
- At the time that you become eligible, your YMCA employer is expected to require employees to make employee contributions to the 401(a) Retirement Plan.

You are eligible to participate in the 403(b) Savings Plan while employed with a participating YMCA during the time that you waive participation in the 401(a) Retirement Plan.

Complete **Step 1** and attach proof of your age, such as a copy of your birth certificate, driver's license, etc. Return this waiver and proof of age to your YMCA's CEO, Human Resources or Payroll Department to complete **Step 2** and send to the YMCA Retirement Fund.

THIS FORM MAY NOT BE VALID unless it is completed without erasures or alterations. Faxes and copies will not be accepted unless they are clear and readable. Your request will not be processed until the YMCA Retirement Fund receives the properly completed form from your YMCA.

STEP 1: Signature by Individual

This is to certify that 401(a) Retirement Plan provisions have been fully explained to me by my YMCA, and that I have made the decision below voluntarily and knowingly.

I choose not to participate in the Young Men's Christian Association Retirement Fund Retirement Plan (the "401(a) Retirement Plan"). If at a later date I wish to participate in the 401(a) Retirement Plan, I understand that I must submit a *Revocation of Waiver* to my YMCA's local plan administrator. I understand that, if my YMCA adopts a *Resolution to Amend Participation* whereby employee contributions are no longer required, I will participate prospectively in the 401(a) Retirement Plan as of the start of the payroll period that the *Resolution* become effective.

I acknowledge that this Waiver is not applicable to waive participation for any other YMCA which may employ me and I understand that I must file a *Waiver of Participation* with each of my YMCA employers. If I am also employed with a YMCA that does not require its employees to make employee contributions to the 401(a) Retirement Plan, I understand that employment will void this waiver. I understand that while this Waiver is in effect, I will receive credit for my service towards eligibility, but I will not receive credit towards vesting for the time that I am eligible to participate in the 401(a) Retirement and waive that participation.

Your Name (please print) _____

Original Hire Date ____/____/____
(mm/dd/yyyy)

Birth Date ____/____/____
(mm/dd/yyyy)

- -
Social Security Number

YOUR SIGNATURE _____ **Today's Date** ____/____/____
(mm/dd/yyyy)

STEP 2: Authorization by YMCA

The employing YMCA must complete this section and send this waiver, along with a copy of the employee's proof of age, to the YMCA Retirement Fund, 5334 Sterling Center Drive, Westlake Village, CA 91361. Retain a copy of this form for the employee's personnel records at your YMCA.

President/CEO or Executive Director of the YMCA:

SIGN NAME _____

Print Name _____ **Today's Date** ____/____/____
(mm/dd/yyyy)

YMCA Name _____ **YMCA Number** _____

The employing YMCA should permanently retain copies of the *Waiver of Participation* forms.