

	Contract N°	Nama	Postalo codo miseo
yer	Contract N'	Name	Postale code, place
ent	Name	First name	Insurance number (AHV/AVS)
	Street, N°	Postale code, place	
	Date of birth	Civil status	Sex □ m □ f
	Name First name		
	Insurance number (AHV/AVS)	Date	e of birth
	Street, N' Postal code, place		
	Start date of partnership		
Member acknowledges that, in the event of his/her death, his/her partner will be the entitled beneficiary in accordance with statutory and regulatory prescriptions. The Foundation only verifies after death whether the regulatory conditions for entitlement are met. The regulatory and statutory provisions in force at the time of death are authoritative.			
fying	The qualifying entitlement to a partner's pension shall only exist if, at the Member's death:		
a) both partners were unmarried and were not bound by a registered partnership (PartG/LPart); and			
<ul><li>b) the partners were not related to one another; and</li><li>c) in the last five years before the Member's death, the partners uninterruptedly shared a common life; or the surviving partner was significantly dependent on the Member, or must provide maintenance for one or more of both their children and</li></ul>			
dren; and d) the surviving partner is not drawing a spouse's or partner's pension from any Swiss or foreign occupational benefits			
institution; and e) the Member declared the partnership to the Foundation in writing during his/her lifetime.			
The Member hereby declares his/her partnership with the above-designated partner and confirms that:			
<ul> <li>he/she is not related to the designated partner; and</li> <li>both partners are unmarried and are not bound by a registered partnership (PartG/LPart); and</li> <li>they share a common life; and</li> </ul>			
	moreover (in addition, if applicable):		
	☐ the partner is dependent to a significant degree on the Member;		
	$\square$ the designated partner must provide maintenance for one or more of both their children.		
	(please tick the applicable box, depending on the actual circumstances, you may tick more than one box)		
	Both the undersigned confirm the existence of a partnership within the above-defined meaning.		
	The following documents must be delivered: Copy of passport or ID for both persons		
iture	Place, date	Clie	nt signature
	Place, date	Part	ner signature