Enrollment Application

I hereby apply for enrollment in the Converge Retirement Plan.

I understand that if payment of contributions is made by the church or organization I serve in an amount equal to the specified percentage of my annual salary, as determined by the provisions of The Plans and operating policies as defined by the Plan Committee, I shall continue as an active member of The Plans, provided my services for which my annual salary is received are those which are ordinarily performed as an employee of a Converge church or district conference office, and provided such annual salary is received from a church or other organization fully

PARTICIPANT SIGNATURE

Provide your completed and signed form to your church's retirement plan administrator.

I understand the amount of such reduction, pursuant to this election, will be withheld from my paychecks and paid by my employer into my account in the plan. I understand elective deferrals are irrevocable once the employer withholds the deferrals from my paycheck. I further understand that written notice must be given before the effective date of any modification. This election will remain in effect until I revoke it in writing or until I complete a new *Retirement Contribution Agreement*.

Participant signature: ____ Date: _______/_______/_______

Member hire date: ______________ Contract starting date, 1st day of_______________20___

Participant Defined Benefit Plan Contribution

Total Monthly Compensation

Each monthly contribution shall be equal to the specified amount of the total of monthly cash salary (plus allowance for housing, utilities, etc. for pastors and missionaries only) as indicated below.

Monthly Cash Salary $______________

Monthly Allowance (housing) $______________

Total Monthly Compensation $______________

Defined Benefit Plan Contribution (See note below).

$_________________ monthly

Defined Contribution (Supplemental) Plan, if applicable

__________% or $____________________ from employer

__________% or $____________________ from participant

Note: Effective 06.01.2024, an employer non-matching contribution of at least 6% must be contributed across Converge retirement plans. Contributions to the Defined Benefit plan are limited to 3%, 4%, 5%, or 6%. For anything less than 6%, the remaining amount must be contributed to the Defined Contribution plan to meet the required employer contributions.