

## PAYMENT INSTRUCTION FORM FOR PAYMENTS TO SWITZERLAND

You must complete all sections of this form for us to update your record.

Personal Details	
Your full name (a se	Pension reference number parate form must be completed If you have another membership with us)
Address	
-	Postcode
Email address	Contact telephone number
National Insurance No	
Existing Bank Details (where we currently pay your pension)	
Name of bank	Account name
Please fill out the relevant details below from your existing bank account. (include your sort code, bank address, account number (if UK bank). Or if overseas, your institution number, bank identification code, IBAN or routing number whichever is relevant to the bank).	
New Bank Details (where you would like your pension to be paid)	
Name of bank/building soci	iety
Bank address	
Account name (The account receiving your pe	ension <u>must</u> bear your name)
Account number	
Sorting code	
Declaration	
In line with data protection and fraud prevention measures, it is important for us to verify your identity before we make any changes to your personal records. We cannot accept this form if it's not signed.	
Signed	Date

**Please post your completed form to:** British Airways Pensions, PO Box 2074, 8 Castle Street, Liverpool, L69 2YL. Alternatively, you can email it to <a href="mailto:post.inbound@bapensions.com">post.inbound@bapensions.com</a>