

GEMINI Sammelstiftung  
c/o Avadis Vorsorge AG  
Zollstrasse 42  
Postfach  
8031 Zürich

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## Application to join the occupational benefits fund

### Insured person's details

Employee benefits unit

Company

Fund type  Pension fund  Management scheme/supplementary fund

### Insured person

Surname

First name

OASI number

Gender

Date of birth

Marital status

Address

Postcode and city

Language  English  German  French  Italian

Members may register their life partners (same sex or opposite sex) with the Foundation.  
The respective statement of beneficiary is available on the Foundation's website.

### Personal pension details

Date of entry into occupational benefits fund (day, month, year)

Date of entry into company (day, month, year)

Estimated OASI salary extrapolated to a full year CHF

Level of employment in %

Fully fit for work upon entry into the fund  Yes  No

Coordination with disability insurance (IV)  Draws an IV pension  
 Currently being assessed by IV

### Confirmation by employer

Place/date

Company stamp and signature