



Payroll Summer Savings Plan

Teachers

I, _____ hereby authorize and request my employer to deduct and remit

(please select) 5% 10% 15% 20%

of my monthly net pay, in accordance with the Letter of Understanding among School District #45 (West Vancouver), WVTA, BCTF and BCPSEA, to the 10 month Summer Savings Plan.

OR

I, _____ am currently participating in the Summer Savings Plan and do not wish to continue to deduct and remit contributions in the 2016/2017 school year.

Date

Signature

New requests for deductions or changes to existing contribution rates must be delivered to the Payroll Department by fax to 604-981-1001 or email to payroll@wvschools.ca by 4:30pm on SEPTEMBER 9, 2016.

Requests to discontinue participation must be delivered to the Payroll Department by fax or email by JULY 31, 2016.

No late enrolments or changes will be accepted.