

# Enrollment Application and Retirement Contribution Agreement

## Retirement Plan

### General Directions for Completing the Enrollment Application

This form must be typed or completed in ink. If you make any changes to the written information, initial the changes.

#### EMPLOYEE INFORMATION

Participant name: \_\_\_\_\_ Social Security number: \_\_\_\_\_

Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender:  Male  Female Marital status:  Married  Single

Daytime telephone: (\_\_\_\_) \_\_\_\_\_ Email address: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_

Spouse name (if married): \_\_\_\_\_ Spouse Social Security number: \_\_\_\_\_

Spouse birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Do you have prior service with this employer? \_\_\_\_\_

#### CHOOSE YOUR FUNDS

You have the right to make plan investment elections for contributions made on your behalf to the retirement plan. Your employer has designated a Target Date Fund based on your age as your default investment to which contributions will be made if you do not select an option below. All contributions will be placed in this fund until you change your election, and you have sole responsibility for this default election.

##### OPTION 1 — ASSET ALLOCATION FUNDS / Do It For Me

Our professionally managed asset allocation options provide a simple choice for those who want a one-step approach to investing. This investment selection includes both our Target Date Funds and Target Risk Funds.

##### GUIDESTONE TARGET DATE FUNDS

Choose the appropriate MyDestination Fund® that most closely corresponds to the year in which you plan to retire.

(Not applicable if you completed Option 2 or selected a Target Risk Fund below.)

- MyDestination 2015 Fund  MyDestination 2035 Fund  MyDestination 2055 Fund  
 MyDestination 2025 Fund  MyDestination 2045 Fund

##### GUIDESTONE TARGET RISK FUNDS

Choose the (one) fund that best represents your investor profile.

(Not applicable if you completed Option 2 or selected a Target Date Fund above.)

- Conservative — Conservative Allocation Fund  Moderately aggressive — Growth Allocation Fund  
 Moderately conservative — Balanced Allocation Fund  Aggressive — Aggressive Allocation Fund

##### OPTION 2 — CORE AND SPECIALITY OPTIONS / Do It Myself

This approach is designed to help you build your own portfolio utilizing a broad range of core and specialty funds that provide the flexibility to address specific investment strategies. **Once enrolled, you will always have access to make fund exchanges through your online MyGuideStone® account.**

(Not applicable if you completed Option 1.)

- Use this option if you choose to mix your own portfolio from the core and specialty options.

Investment fund: \_\_\_\_\_ Percentage: \_\_\_\_\_ %

Investment fund: \_\_\_\_\_ Percentage: \_\_\_\_\_ %

Investment fund: \_\_\_\_\_ Percentage: \_\_\_\_\_ %

Total (must equal 100%): \_\_\_\_\_ %

Please write in the space below or on a separate page for more than three fund choices.

Participants are prohibited from exchanging out of the Capital Preservation Fund (if applicable) to a “competing fund” without first investing in a “non-competing fund” for a period of at least 90 days. Also, simultaneous exchanges are not allowed. For more complete information, visit [GuideStone.org](http://GuideStone.org) or call 1-888-98-GUIDE (1-888-984-8433).

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**EMPLOYEE ELECTION**

I elect, understand and authorize my employer to deduct from my paychecks the following amount, remitted into my account in the retirement plan beginning \_\_\_\_/\_\_\_\_/\_\_\_\_:

Select one or a combination of contribution types below.

- Tax-sheltered:     12%    9%    6%   or    Other: \_\_\_\_\_% or \$\_\_\_\_\_ per pay period/per month (circle one)
- Roth deferrals\*:    12%    9%    6%   or    Other: \_\_\_\_\_% or \$\_\_\_\_\_ per pay period/per month (circle one)
- Tax-paid\*:         12%    9%    6%   or    Other: \_\_\_\_\_% or \$\_\_\_\_\_ per pay period/per month (circle one)

\*Please see your employer for availability of Roth and tax-paid contributions.

I understand the amount of such reduction, pursuant to this election, will be withheld from my paychecks and remitted 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*.

Employee signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**EMPLOYER**

Employer name: \_\_\_\_\_ Employer number: \_\_\_\_\_

Hire date: \_\_\_\_/\_\_\_\_/\_\_\_\_      Date of participation: \_\_\_\_/\_\_\_\_/\_\_\_\_

Prior service with current employer: \_\_\_\_\_ years \_\_\_\_\_ months      Most recent termination date with this employer: \_\_\_\_/\_\_\_\_/\_\_\_\_

**If other service counted for eligibility and/or vesting under the plan:**

Previous employer name: \_\_\_\_\_      \_\_\_\_\_ years \_\_\_\_\_ months

**Before entering contributions into the Employer Access® Program (EAP), convert all contributions to dollar amounts. For more information about GuideStone's EAP, please contact your GuideStone® administrator.**

Employer contributions: \$ \_\_\_\_\_ or \_\_\_\_\_%

Participant contributions:

Tax-sheltered	Roth elective deferrals	Tax-paid
\$ _____ or _____%	\$ _____ or _____%	\$ _____ or _____%

**Because this form also serves as a *Retirement Contribution Agreement* between the participant and employer, both should retain a copy of this form. If the employer is not enrolled in GuideStone's EAP, please return the original to GuideStone.**

Employer authorized signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Employer authorized printed name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_