Subject: You’re eligible for OMERS

Dear [*employee name*]:

We are pleased to inform you that you will be eligible to join the OMERS Plan on [*eligibility date - month, day, year*].

The enclosed booklet details the features of an OMERS Plan pension, which include:

* income for life
* steady payments
* employer-matched contributions
* early retirement options
* survivor benefits
* disability benefits
* value for contributions.

At the end of the booklet, you’ll find an Offer of OMERS Membership form. **Please complete and sign this form and return it to [NAME, DEPARTMENT] by [DATE].** Complete the form even if you choose not to become a member – it’s important that we have a record of your decision.

If you choose not to join, you can still join in the future provided your earnings and/or hours stay above the minimum required to qualify for membership; however, you will need to contact your employer to initiate enrolment.

For more on how OMERS can help prepare you for the future, visit **omers.com,** or call OMERS Client Services at 416-369-2444 or 1-800-387-0813 and speak to a Client Services representative.

Yours truly,

*[name, title]*