

Application for membership in a deferred profit sharing plan

Return to Great-West Life, Group Retirement Services

SECTION 1 – EMPLOYER/PLAN	SPONSOR IN	FORMATION					
Name of employer/plan sponsor	Policy/plan number						
SECTION 2 – APPLICANT INFOR				and the alone	4)	lata dita di	
In accordance with the Income Tax Adperson who is, or is related to, a speci a person related to a member of the pa	fied shareholder	of the employer or of a	a corporation	related to the employer	; 3) where the	employer	is a partnershi
Last name	Middle initial	First r	ame		☐ Male	Divisi	on/subgroup
Applicant's address (apt. no., street	no., street, city,	province and postal of	code)		T T CITIAIC	Teleph	none number
	·					()	-
Social insurance number		Marital status	E-mail addre	Langua	ge preference		
Applicant authorizes use of his/her social insurance number for tax reporting, identification and record keeping		☐ Married ☐ Cor☐ Quebec civil unic☐ Single ☐ Oth			☐ English ☐ French		
Date of birth		employment		te joined plan	Identifica	ition/empl	oyee number
)000/ mm dd				•		· ·	
yyyy mm dd SECTION 3 – IMPORTANT INFO	yyyy RMATION	mm dd	уууу	mm dd			
Note: The Trustee will compensate example, the plan will be credited with over the rate will be for the Trustee's a a certain percentage multiplied by suctrustee services. SECTION 4 − BENEFICIARY IN INVESTED IN STOCK. LEGAL A Where permitted by law, these designated all beneficiary designations are revocated and Designation of Irrevocable beneficiary designation of Irrevocable beneficiary (and it is spouse or civil union spouse). With the consent of the beneficiary (wounder or in respect of, or otherwisting I, as applicant, stipulate the designation is revocable.	FORMATION DVICE SHOUL attempts to the cash deposits of the cash deposits	ate determined for casstee, in turn, compensate, in turn, compensate, condon Life will also (IN QUEBEC, NO-D BE SOUGHT AB benefits payable under signation where: mpleted; or ciary is the applicant's sivil Code of Quebec are designation to be rely designation is irrevolved agal age to give consequent.	h deposits su ates London L o pay the Trus TAPPLICA OUT NAMIN the plan upor spouse (desig applies, any of evocable by cable and whilent), alter or r	bject to any established ife by an amount which stee, on behalf of the or the black of the or the black of the or the black of the blac	d minimums. In is equal to the employer, a fix on the employer on the employer on the employer ing, the applicassign, surre	The excess e Trustee' ked fee pe CONTRIE EE IN YC ty) – see b se as ben here meal ant may n nder, exer	s interest earners prime rate less prime rate less raccount for in BUTIONS ARDUR WILL) box below. eficiary is an arried loot, without raise rights
Beneficiary(ies) in the event of death o	f the applicant. I			all revocable beneficiary			
Last name	First name	Relationship to	applicant	% of distribution	Gende		Minor ☐ Yes ☐ No
					Male Male		Yes No
				Total 1000/	☐ Male ☐	Female	☐ Yes ☐ No
Unless the law requires otherwise, the there is no surviving beneficiary, to n revert to my estate/successors. Contingent beneficiary(ies) – If all of the survivious of the	ny contingent be	neficiary(ies). If there	is no appoint	ed or surviving conting	gent beneficia		
Last name	First name	Relationship to		% of distribution	Gende		Minor
					☐ Male ☐ ☐ Male ☐ ☐		Yes No
					☐ Male ☐		Yes No
				Total 100%			
Minor beneficiary appointment – If a section (not required if there is a written For Quebec only – Benefits payable	trust agreement)			· ·			• • •

DPSP – June 2009 Page 1 of 2

unless the applicant has established a valid trust for the beneficiary, by will or by separate contract, to receive the benefits. If so, the trust should be named

as the beneficiary, in this section (as applicable), and the trustee should be named in 5. Legal advice should be sought.

Application for membership in a deferred profit sharing plan (continued)

SECTION 5 - TRUSTEE APPOINTMENT FOR BENEFICIARY LACKING LEGAL CAPACITY

Please complete this trustee appointment section if any of the named beneficiaries or contingent beneficiaries are minors or otherwise lack legal capacity to receive the proceeds (not required if the applicant has already completed a trust agreement). If the applicant wishes to name different trustees for different beneficiaries, please complete the *Addendum to designation of revocable beneficiary/trustee appointment* form.

The applicant appoints the trustee to receive, in trust, all benefits payable to any beneficiary designated under this plan who, at the time benefits are paid, is a minor or lacks legal capacity to give a valid discharge according to the laws of the beneficiary's domicile. Payment of benefits to the trustee discharges the Trustee and London Life to the extent of the payment. The applicant authorizes the trustee in his or her sole discretion to use the benefits for the education or maintenance of the beneficiary and to exercise any right of the beneficiary under the plan. The trustee may, in addition to the investments authorized for trustees, invest in any product of, or offered by, London Life or its affiliated financial institutions. The trust for any beneficiary will terminate once that beneficiary is both of age of majority and has legal capacity to give a valid discharge. The applicant directs the trustee to deliver at that time to the beneficiary the assets held in trust for that beneficiary. The applicant or the applicant's personal representative (in Québec: the applicant's tutor, curator, liquidator, or mandatory in the event of incapacity) may by writing appoint a new trustee to replace the former trustee.

Last name of trustee First name Relationship to applicant

SECTION 6 – INVESTMENT ALLOCATION INSTRUCTIONS

Complete if the employer/plan sponsor has given members the right to make the investment decision for the contributions (if no election is made, contributions will be invested in the default investment option).

If the below selection includes stock, complete the Additional Member Information form.

Name of investment and/or identifier	Percentage	Name of investment and/or identifier	Percentage
	%		%
	%		%
	%		%
	%		%
	%		%

Total allocation must equal 100%

SECTION 7 – CONFIDENTIAL INFORMATION FILE

The Trustee will establish a confidential information file that contains personal information concerning the applicant. By submitting a written request to the Trustee, the applicant may exercise rights of access to, and rectification of, the file. The Trustee will collect, use and disclose the applicant's personal information to: process this application and provide, administer and service the plan applied for (including service quality assessments by or on behalf of the Trustee); advise the applicant of products and services to help the applicant plan for financial security; investigate, if required, and pay benefits under the plan; create and maintain records concerning our relationship as appropriate; and, fulfil such other purposes as are directly related to the preceding. The Trustee may use service providers within or outside Canada. Personal information concerning the applicant will only be available to the applicant, plan sponsor, pension and related government authorities, the Trustee, their affiliates, and any duly authorized employees, agents and representatives of the Trustee or their affiliates, within or outside Canada, for or related to the purpose of the plan, except as otherwise may be required, authorized or allowed by law or legal process, or by the applicant. In all cases, availability is subject to lawful determination by the Trustee. Personal information is collected, used, disclosed, or otherwise processed or handled in accordance with governing law, including applicable privacy legislation, and the applicant's personal information may be subject to disclosure to those authorized under applicable law within or outside Canada.

SECTION 8 – SIGNATURE

The applicant confirms the instructions, designations and appointment on this form. The applicant is aware of the reasons the information covered by the applicant's authorizations and consents is needed, and the benefits of, and the risks of not, authorizing/consenting. The applicant authorizes and consents to the Trustee collecting, using, and disclosing personal information concerning the applicant for the purposes outlined in the Confidential Information File section. This authorization and consent is given in accordance with applicable law and without limiting the authorizations and consents given elsewhere in this application. The applicant's authorizations and consents will begin the date this application is signed and end when no longer required. The applicant's authorizations and consents may be revoked at any time by either written or electronic notification to the Trustee, subject to legal and contractual considerations. A reproduction of the applicant's authorizations and consents will be as valid as the original. The Trustee may accept instructions from the applicant or in such form or through such media as may be determined from time to time. The applicant consents to the taping of any telephone calls between the applicant and the Trustee or its agent. Where the Trustee has applied for a group annuity contract with one or more of the insurers, the annuitant hereby appoints the Trustee as the annuitant's exclusive and irrevocable agent for purposes of transmitting instructions and otherwise dealing in any way with respect to the applicant's interest in such contract(s). The applicant hereby instructs the Trustee to deliver a copy of this appointment to the insurer(s) and to direct contributions to the applicable insurer and contract. The Trustee reserves the right to review any trades or transactions prior to their entry to the applicable market and has the right to reject any order entered by the applicant or to cancel any trade resulting from an order entered by the applicant. The applicant certifies that the information provided in this application is true and complete and that the Trustee may rely upon it until changed. The Trustee and its agent are authorized to use the information collected and provided as part of this application in the opening of other account types as may be made available by it to the applicant through their plan sponsor. If, upon termination of employment, the applicant makes no election within the prescribed time period, the applicant hereby appoints the Trustee to act as the applicant's agent to exercise any transfer option available under the plan and as permitted by the Income Tax Act (Canada).

Signature of applicant Date

DPSP – June 2009 Page 2 of 2