

Change of member information

Return to Great-West Life, Group Retirement Services

Services for this plan are provided by The Great-West Life Assurance Company (Great-West). The policy is issued by London Life Insurance Company, a subsidiary of Great-West.

EMPLOYER/PLAN SPONSOR INFORMATIO	N			
Name of employer/plan sponsor		Policy/plan number		
MEMBER INFORMATION (please print)				
Last name Initial	First name	Certificate / Social insurance number		
Business telephone number		Home telephone number		
_ () -	Ext.	() -		
 If the member's name has changed – complete Part A If an existing beneficiary's name has changed – complete Part B (to change your beneficiary or to designate a new beneficiary, please complete the Designation of revocable beneficiary/trustee appointment form) If the member's address has changed – complete Part C For RPP's only, if the member's province of employment has changed – complete Part D For RPP's only, if the member's spousal information has changed – complete Part E (if the member is also designating the new spouse as their beneficiary, this change form is not required – complete the Designation of revocable beneficiary/trustee appointment form) PART A – CHANGE OF MEMBER NAME The member's name has changed from: to: Reason for change: The member has married. 				
The member its returning to her maiden name. The name of the member is incorrectly shown on Great-West Life's records. The name of the member has been legally changed. The member's legal name is but the member is commonly known by the name indicated above. Other				
PART B – CHANGE OF BENEFICIARY NAME				
Please note that this is to change the name of an existing beneficiary only. If you are changing your beneficiary or a new beneficiary is being designated please complete the Designation of revocable beneficiary/trustee appointment form. The beneficiary's name has changed from:				
•				
Reason for change: The beneficiary has married. The beneficiary is returning to her mathematical in the peneficiary is incorrown. The beneficiary has been legally addressed. The name of the beneficiary has been the beneficiary is legal name is but the beneficiary is commonly known. Other	aiden name. ectly shown on Great-West Life opted. en legally changed.			

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Change of member information (continued)

PART C – CHANGE OF MEMBER ADDRESS				
New address (apt. no., street no., street	, city, province and postal code)	Internet address		
New phone number () -				
PART D – CHANGE OF MEMBER PROVINCE OF EMPLOYMENT (RPP's only)				
This section is applicable to Registered Pension Plans only.				
Effective The	above named member reports to work in			
yyyy mm dd	·	indicate province		
PART E - CHANGE OF SPOUSAL INFORMATION (RPP's only)				
This section is applicable to Registered Pension Plans only.				
New spousal information is as follows:				
the member no longer has a spouse; or,				
_		□ Mala		
the new spouse is:		∐ Male □ Female		
Last name	Initial Fi	rst name		
Note: if the member is also designating the new spouse as their beneficiary, this change form is not required – complete the <i>Designation of revocable beneficiary/trustee appointment</i> form.				
PART F – AUTHORIZATION				
Member authorization (Required for Parts A, B, C and E)				
I request that Great-West Life adjust my member records as indicated in Part A, B, C and/or E above.				
Date	Member's signature			
Employer/plan sponsor authorization (Required for Part D)				
I request that Great-West Life adjust the above member's province of employment as indicated above.				
Date	Signature			
	Signature of employer/plan spo	onsor by authorized person		

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