

Application for membership in a group registered pension plan

Return to Canada Life, Group Retirement Services

In this application, "you" and "your" refer to the person who is applying to become a member of the group registered pension plan (the plan), and "we, and "our" refer to The Canada Life Assurance Company, the issuer of the group annuity product for the plan

3A5. We can be conta	cted at 1-800-724-34	02 or by visiting greac	cess.co	om.	nany produ	ot for the	pian, 100 C	Janoine 3	sueet North, V	winnipeg, will R	
SECTION 1 - EMPI			GERRORGI			iawoulikanikas	uli Serince (Si		dest (essa i Păpa partită)	Esperie Zorker (III. A.	
Name of employer/plan sponsor Nishnawbe Aski Legal Service						Policy/pla	an number				
SECTION 2 -INFOR	RMATION ABOUT	YOU (please print)	siderbe en este	Karata (27 i 1970)	nata Spillionia san	n (Principal Control	2012/05/2016		organisti dinataranja depart	
Last name Cameron	Middle i					Division/subgroup		Iden	Identification/employee number		
Social insurance number (SIN) 485 - 877 - 138		Date of employment			Date of birth			Gender	Language		
You authorize the use of record keeping		g, identification and	2021		l3 id	1971 уууу	10 11 mm dd		□ Male ⊠ Female	⊠ English □ French	
Last name of spouse/	common-law partner	First name				L		address			
Landon Garnet				Required f				d for online	n@nanlegal.on.ca for online access and to email information plan or services connected with it		
Address (apt. no., stre 605 Cameron Drive C	eet no., street) :/O Linda Cameron G	erneral Delivery								Was with	
City Wabaseemong Independent Nation				Province Ontaroi				Postal code P0X 1P0			
If the above address is	a PO box, general d	elivery or rural route, a	also inc	lude the ci	vic or stree	t address	below	•			
Address (apt. no., street no., street)				City		Province		Postal code			
Telephone no.	Al	ernate telephone no.	·	Province (of employm	ent		Date	joined plan		
	07 - 464 - 5703 Ext. 807 - 444 - 6045			Ontario				2022 уууу	2022 03 14 yyyy mm dd		
Are you a connected podetermine whether you	erson? ☐ Yes* ☒ I I are a connected per	No *Form T1007 mus son).	st be file	ed by your	employer v	ith Cana	da Revenu	e Agency	(the plan adn	ninistrator can he	
SECTION 3 - YOUR	R BENEFICIARY D	ESIGNATION		10 1 Sept. 10 10 10 10 10 10 10 10 10 10 10 10 10	Salara (Elizaria				Seesel Listines		
You can appoint one of spouse or common-law beneficiary, complete the Primary beneficiary(ie	the <i>Designation of irre</i>	ons are revocable exc	cent in (the terms Quebec (se	of the planee "Importa	may req	uire payme ec residents	ent of the s"). If you	death benefi wish to design	t to your qualifyir nate an irrevocab	
		Date of	f birth		Rela Select b	Relationship of beneficial Select box below OR Spe			ou er Other	% of	
Last name	First name	уууу т	A 150 PARSONS	Married	Queb civil un spous	ion Co	mmon-law partner	41.01 (01.01 mg (0.00 g (0.00 g (0.00 g)))	Other ild, friend, etc	benefit	
Landon	Garnet								.comment was kinesee	100	

		- 0°-7°-7411								APPENDING APPENDING AND AND APPENDING APPENDIN	
Important: Quebe								·	(0	Total 100%	

- If you appoint your married or civil union spouse as your beneficiary, they will be irrevocable (meaning you cannot change your beneficiary or perform certain transactions such as making withdrawals (where permitted) without their consent) unless you check the box below: I designate my married or civil union spouse revocably 🗌
- The death benefit will be paid to the tutor(s) of a beneficiary who is a minor (generally the parents) or the tutor or curator of a beneficiary who otherwise lacks legal capacity unless a formal trust has been established by will or separate contract (in which case, designate the trust as beneficiary in this section)

Unless the law requires otherwise, if one of your primary beneficiaries predeceases you, their share will be paid to the surviving primary beneficiaries in equal shares, or if there is no surviving primary beneficiary(ies), to your contingent beneficiary(ies) named below. If there is no contingent beneficiary(ies), the benefit will be paid to your estate.

Contingent beneficiary(ies) on your death

Last name	First name	Date of birth yyyy mm dd	Relationship to you	% of benefit
Cameron	Ronan	1993 12 01	Son	33.
Cameron	Cheyenne	1996 10 06	Daughter	33
Cameron	Dyami Donovan	2020 10 15	Grandson	34
RPP (Pav) January	2020			Total 100%