

# I.A.M. Labour-Management Pension Fund (Canada)

Tel: 613.567.8259

Toll-free: 1.888.354.5444

## **Enrolment Form**

Please complete and send this form and all related documents to: I.A.M. Labour-Management Pension Fund (Canada)
116 Lisgar Street, Suite 204, Ottawa, Ontario K2P 0C2

1. Personal Information	on							
S.I.N.	JII			Ger	ider:	Male	Female	Other
Name:		Firs	*				Middle	
Date of Birth (mm/dd/yyyy):		FIIS			Single		Married	Separated
					Domestic			·
Preferred Language:	English	French			Partnership		Divorced	Widowed
2. Contact Informatio	n							
Email:				Phone Number:				
Street address:								
City/Town	Province					Postal Code		
3. Employment Inforn	nation							
Name of Present Employer:								
Job Classification:	Date of Hire:							
					mm/dd/y	/ууу		
4. Spousal Information	n <i>(Please</i> s	see reverse fo	r the de	finition of a s	pouse.)			
Name: Last		First					Middle	
Gender: Male	Female	Date of Birth:	mm/dd/yyyy	/				
5. Beneficiary Design	ation (For	information o	on namir	ng a heneficia	arv nlease	see re	overse )	
Name:	idiloii (ror	mormation	, mainin	ig a perienoie	iry, picuse c	30070	<i>verse.)</i>	
Last Beneficiary Relationship:		First		Beneficiary Ty	ne.	Individ	Middle	Organization
Street address:				Donomolary Ty	<b>PO.</b>	marvia	udi	Organization
City/Town			Province				Postal Code	
6. Declaration on Beneficiary Designation								
The above designation revokes any previous beneficiary designation the Trustees of the I.A.M. Labour-Management Pension Fund (Canada) may have on file. I reserve the right to revoke and change my beneficiary designation at any time by giving written notice on the form prescribed by the Trustees of the I.A.M. Labour-Management Pension Fund (Canada).								

Please continue to section 7.

Signature

Date (mm/dd/yyyy)

#### **Enrolment Form**

#### 7. Certification and Authorization

I certify that the information I have provided on this form is accurate and complete. I authorize the collection and use of all information contained in this form, and any additional personal information which I may hereafter provide, by the Trustees of the I.A.M. Labour-Management Pension Fund (Canada) and their designated agents and advisors, including the use of social insurance number for identification, administration and tax reporting purposes. I also authorize the collection, retention, disclosure and sharing of my personal information by the Trustees and their designated agents, advisors and service providers as may be required to administer the Plan including but not limited to determining eligibility for benefits, processing and paying benefits and on-going financial management of the Plan including cost analysis and internal audits. I understand that I may withdraw all or part of my consent at any time, in writing, but that doing so may interfere with the administration of the Plan and any benefits that may be payable to me. I understand that for more information on how the Fund Office ensures my personal information is protected, I may refer to the Fund's Privacy Note to Members.

Signature	Date (mm/dd/yyyy)

#### **General Information**

## Who qualifies as my spouse? (Federal)

A spouse is someone who, at the time of determination, is married to you or is party to a void or, in Quebec, null marriage. A spouse may also be someone who, at the time of determination, is living with you in a conjugal relationship for at least one year. If you have a married spouse from whom you are separated and you are living with another person, for purposes of this Plan, your spouse is the person with whom you are living in a conjugal relationship for at least one year.

### Naming beneficiary or beneficiaries.

The beneficiary designation applies if you die before retirement and you do not have a spouse at the time of your death. Your beneficiary can be a person(s), organization or your estate. You can change your beneficiary at any time by completing another Marital Status / Beneficiary Change Form and submitting it to the Fund office. Your designation is not valid until this form is received by the Fund Office.

If you have a spouse and you complete the *Beneficiary Designation* section, should your spouse die before you, your designated beneficiary is the person who would receive the death benefit, if any death benefit is payable after your death.

You may name more than one beneficiary. In this event, any death benefit that is payable will be divided in equal shares among them unless you indicate otherwise. If one of the beneficiaries dies before you, his/her share would be divided among the remaining beneficiaries.

## What if I want to name a minor as a beneficiary?

Someone under the age of 18 (known legally as a minor) cannot directly receive survivor benefits. If you want to ensure your child will benefit from any death benefit upon your death, you should get independent legal advice on how this can be done.

Please note that the information provided above does not cover all details of the Plan. The official Plan document governs in the event of a conflict, discrepancy or omission.