## Millwrights Machine Erectors & Maintenance Union Local 1021 Group Retirement Savings Plan

Employee Information										
Name (Last)			)		(Middle)				Sex	
									М	F
Address (mailing)							Suite No.			
City			Provin	се	Postal Code		Telephone Number			
Date of Birth Month		Day	Day Year		Social Insurance Number					
				1						
Married Common-law Single										
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Declaration and authorization with respect to the collection and communication of personal information to a third party										
For the purpose of administering my Plan, I hereby authorize the plan sponsor and registered mutual fund representative to communicate all information that is deemed necessary and that is held regarding myself to Ellement Consulting Group.										
Furthermore, I authorize Ellement Consulting Group to communicate the information that it holds regarding myself to the said third party as mentioned in the previous paragraph, when necessary. I authorize Ellement Consulting Group to use or communicate my Social Insurance Number for income tax and administrative purposes.										
A photocopy of this authorization is as valid as the original. I acknowledge that I have read the above notice regarding the personal information management.										
In addition, I understand, in accordance with the terms of the Plan and the group contract, that any benefit paid under the Plan will be settled in accordance with the provisions of the plan, the Income Tax Act (Canada) and, when applicable, in accordance with the Taxation Act (Quebec).										
I certify that all of the information in this document is, to the best of my knowledge, true and complete.										
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Signed at				this	day of			2	20	
Signature of Employee:										
Union Local 1021 Use Only										
Participation Effective	Month	Day	Year		М	Member or Non-Member				
					Member	Pe	ermit	Travel (	Card	
		-	1	1						
Signature of Authorized Union Represer										
				Ive		Da	ate			
Please return this form, w original signature by mail	ement Consulting Group 154 108 St NW									
Edmonton AB T5J 1L3										
Phone: (780) 452-5161 Toll Free: 1-800-770-2998										