



Please print clearly in the blank boxes.

## Application Form

### Sign up for your Registered Pension Plan (RPP)

Send your completed form to:

**Foursquare Gospel Church of Canada**

Rhonda Berkhiem  
B307 - 2099 Lougheed Highway, Port Coquitlam, BC, V3B 1A8

*If you aren't sure how to complete any of these boxes, the Plan Sponsor/Employer can help you.*

### Tell us about your plan

Plan Sponsor/Employer <b>Foursquare Gospel Church of Canada</b>		Manulife policy number <b>10000971</b>
Member Number	Date you started with your employer (mmm/dd/yyyy)	Date you are joining the plan (mmm/dd/yyyy)
Province of Employment		

### Your personal information

Gender	First Name	Middle Initial	Last Name
Mailing address (number, street and apartment number)			
City	Province	Country	Postal Code
Date of birth (mmm/dd/yyyy)	Social Insurance Number (SIN)		Marital Status
Spouse's name		Spouse's date of birth (mmm/dd/yyyy)	
Your preferred language	Telephone number	Ext.	Email address

A **revocable** beneficiary can be changed at anytime.

An **irrevocable** beneficiary can only be changed with written consent from that beneficiary. You will also need your beneficiary's consent to withdraw or transfer money from your account.

If you want to name more than three beneficiaries, attach a separate page with the names and the percentage of proceeds for each beneficiary.

If you have locked-in money in your RSP and you are married on the date of your death, the law may require any death benefit be paid to your spouse, regardless of other beneficiaries you've named.

If you die while your beneficiary is still a minor, the trustee you name on this form will act on the child's behalf.

## Name your beneficiary (or beneficiaries)

If you do not name a beneficiary, proceeds will be paid to your estate.

Check here if you have attached a separate page listing your beneficiaries. Please sign and date.

Name	Relationship	Percentage of proceeds

The above beneficiary designations are considered revocable (if you live outside of Quebec).

### If you live in Quebec:

Check here to make your beneficiaries revocable. Otherwise, they will be considered irrevocable.

### Trustee for a minor beneficiary named above (not applicable in Quebec)

Any payment to a beneficiary who is a minor will be paid in trust to the trustee named below.

**In Quebec**, the proceeds will be paid in trust to the minor child's tutor.

Trustee name	Relationship

If you do not complete this section, or the total does not add up to 100%, your contributions will be invested in the plan default fund - ML JF Balanced.

You can go online at anytime to change the funds you have chosen.

The minimum amount you can invest in a fund is 5%.

Percentages must be whole numbers.

Note: the investment performance of a market-based fund is not guaranteed.

\*Before you choose a fund that provides a guaranteed income, we encourage you to take a few minutes to learn whether this type of fund is suitable for you. Refer to "The Bold Print" about Manulife's Group IncomePlus for details.

## Your investment instructions

Follow the instructions on page 3 of your Fund Selection Guide to see what type of investor you are. Then fill in **one** of the sections below according to your type.

### Complete if Asset Allocation Fund is your investment strategy

- Follow the instructions starting on page 4 of your Fund Selection Guide to determine your investor style and choose your Asset Allocation Fund.
- Write in the 4-digit fund code for your Asset Allocation Fund below and the percentage you want to invest in this fund.
- If you decide to invest a portion of your contributions in Group IncomePlus, you need to indicate the percentage you will invest in that fund below\*.

Fund Code	Fund name	Percentage of your contribution
	<b>Manulife Asset Allocation Fund</b>	
Fund Code	Fund name	Percentage of your contribution

### Complete if Build your own portfolio is your investment strategy

- Follow the instructions starting on page 4 of your Fund Selection Guide to determine your investor style and choose your funds.
- Specify the percentage of contributions you want to invest in each fund. Your percentages must add to 100%.

Fund Code	%	Fund Code	%	Fund Code	%	Fund Code	%
1001		1003		1005		6203*	
3132		4141		4191		5011	
5181		5241		5291		5452	
7121		7131		7132		7141	
7241		7381		8131		8631	
8192		8321		8452		8181	
<b>Total selected must add up to 100%</b>							<b>100%</b>

### Please sign here

You confirm that you have read, understood and agreed to the information in this form, including the *Enrolment and Registration Authorization* section below, and the *Personal Information Statement*. You also confirm that information in this form is correct to the best of your knowledge.

#### Enrolment and Registration Authorization

You request that Manulife enroll you as a Member in this plan. If applicable, you authorize the Plan Sponsor/Employer to deduct your contributions to the plan from your earnings.

If you have selected Group IncomePlus, you acknowledge that you have read and understood The Bold Print and by signing below, you agree to the terms, conditions and fees applicable to that option.

Your signature	Date signed (mmm/dd/yyyy)
Plan administrator's signature	Date signed (mmm/dd/yyyy)

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### For Manulife use

Manulife customer number	Date (mmm/dd/yyyy)	Document version <b>297-1.5</b>
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