



CHAMBER PENSION PLAN

Change of Member Information

For official use only:

Member # _____

Mr Mrs Miss Other Existing Member # _____

Name _____
Last Name First Name Middle Name

Please provide new or updated information below: (attach documentation if relevant i.e. marriage licence or divorce decree)

Name _____ Date of Birth _____
Last Name First Name Middle Name DD / MM / YYYY

Change due to Marriage/Divorce Incorrect information on file Other _____

Local Address _____ Telephone _____
PO Box Postal Code District

Foreign Address _____ Married Yes No

Spouse/Civil Partner Name _____ Date of Birth _____
DD / MM / YYYY

Email Address _____ Other Changes _____

BENEFICIARY

I hereby amend my beneficiary(ies) for purposes of the Chamber Pension Plan, as per below. I acknowledge that this amendment will have no effect to my spousal or civil partner designation without appropriate documentation.

Add	Remove	Last Name	First Name	Initial	Date of Birth <small>DD / MM / YYYY</small>	Relationship
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					

SECURITY VERIFICATION QUESTIONS

Please provide answers to **any two** security questions. I understand that answers provided will be used to verify my identification.

Security Question	Answer any two Questions
What is your mother's maiden name?	
What is the name of your first pet?	
What is your favorite TV show?	
What was your first car?	
How many siblings do you have?	



ADDITIONAL VOLUNTARY CONTRIBUTIONS INVESTMENT INSTRUCTIONS

Additional Voluntary contributions (AVCs) can be made by payroll deductions (if your employer allows). If you wish to make AVCs (or change the level of AVCs you currently make via payroll deductions), please check the box below and enter the amount of your contribution.

I wish to make AVCs through payroll deductions. I have advised my employer of the dollar amount I wish to have deducted from my payroll.

If I do not provide investment instructions, my AVCs will be invested in the same fund as my basic contributions. I understand that:

- The investment instructions provided on this form will apply until such time as I complete, sign and submit a new form
- My employer is under no obligation to make or match AVCs
- AVCs (or related earnings) cannot be withdrawn any earlier than permitted by law

If you have any questions about how to allocate your AVCs, refer to the most recent Fund Fact Sheet or contact the Chamber Pension Plan directly.

ALLOCATION OF ADDITIONAL VOLUNTARY CONTRIBUTIONS

AVCs can be invested in any of the Lifecycle Funds offered by the Chamber Pension Plan. I hereby request that my additional voluntary contributions be allocated as follows:

Fund Name	\$ of AVCs
2030	
2040	
2050	
2060	
Income Growth	
Income Conservative	

SELECTING A MORE CONSERVATIVE FUND OR REALLOCATION OF EXISTING SHARES

- 1) I may choose to invest in a more conservative fund offered by the Chamber Pension Plan by completing the section below indicating the name of the fund (Example: Income Conservative Fund) or
- 2) I may move all or a portion of my existing units by completing the table below (Example 100% Redeem 2040 Purchase Income Growth Fund)

Fund Name	Amount (\$ or shares)
Redeem	
Purchase	
Redeem	
Purchase	

Signature _____

(Signature as appears on passport. Photo ID/passport required for submission.)

Date _____

DD / MM / YYYY

