



Please print clearly in the blank boxes.

**Important:** If this application is for a spousal RSP, the spouse (i.e. Spousal Member) must complete this form.

Check one:

- This RSP is for you as a Member (i.e. employee)  
 This RSP is for you as a Spousal Member

## Application Form

### Sign up for your Group Retirement Savings Plan (RSP)

Send your completed form to:

**Manulife Financial**

Attn: GRS Client Services, KC-6, P.O. Box 396 Str  
Waterloo, Waterloo, ON N2J 4A9, CANADA

*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>Ontario Harness Horse Association</b>		Group annuity policy number <b>530124</b>
Member Number	Date you started with your employer (mmm/dd/yyyy)	Date you are joining the plan (mmm/dd/yyyy)
Division Not applicable	Member class Not applicable	

#### Your personal information

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	
Your preferred language	Telephone number	Ext.	Email address

*Complete this section only if the application is for you as a spousal member. Otherwise, leave this section blank.*

#### Tell us about the contributor (the employee)

First Name	Middle Initial	Last Name
Date of birth (mmm/dd/yyyy)	Social Insurance Number (SIN)	

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. A parent or guardian cannot provide consent on behalf of a minor who has been named as irrevocable beneficiary.

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 have a spouse 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 unless you write "irrevocable" in the chart above.

**For Quebec only:**

The designation of a spouse as beneficiary is deemed to be irrevocable unless specified here:  Revocable

**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

## Your investment instructions

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 Balanced.

You can go online 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.

### Complete if Retirement Date Fund is your investment strategy

Write in the 4-digit fund code for your Retirement Date Fund below.

Fund Code	Fund name	Percentage of your contribution
	<b>Target Retirement Date Fund</b>	<b>100%</b>

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

Write in the 4-digit fund code for your Asset Allocation Fund below.

Fund Code	Fund name	Percentage of your contribution
	<b>Manulife Asset Allocation Fund</b>	<b>100%</b>

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

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	%
1000		1001		1002		1003	
1004		1005		1010		3132	
3191		4131		4141		4161	
4162		4191		4192		4271	
5011		5132		5141		5181	
5241		5271		5291		5301	
5452		5631		7011		7121	
7131		7132		7141		7142	
7143		7144		7241		7272	
7313		7451		7601		7631	
7032		7122		8131		8132	
8142		8163		8196		8322	
8451		8631		8814		8321	
8361		8401		8452		8141	
8161		8181		8311		8362	
8402		8581					
<b>Total selected must add up to 100%</b>							<b>100%</b>

**Please sign here**

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

**Enrolment and Registration Authorization**

I request that Manulife enrol me as a Member in this plan and register me in a Retirement Savings Plan (RSP) under the Income Tax Act (Canada).

I understand that any withdrawals from my RSP will be taxed according to the rules outline in the Income Tax Act (Canada) or the Taxation Act (Quebec), as applicable. I understand that withdrawals may be restricted under the terms of the plan.

I authorize the Plan Sponsor (my employer or my spouse's employer if I am a Spousal Member) to remit contributions and to deliver directions to Manulife on my behalf.

I request that Manulife accept a transfer of locked-in funds into the plan, if applicable, according to the terms described in the Lock-in Retirement Account (LIRA) or locking-in addendum. I understand that the with respect to such funds, these terms will override the group RSP contract.

Your signature (as the annuitant)	Date signed (mmm/dd/yyyy)
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**Brett Marchand**  
Senior Vice President, Group Retirement Solutions

**For Manulife use**

Manulife customer number	Date (mmm/dd/yyyy)	Document version <b>21-1.5</b>
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