

Please print clearly in the blank boxes. Remember to sign and date the form.

This form is also available on the Manulife Web site at [www.manulife.ca/GRO](http://www.manulife.ca/GRO)

## Section 1

**Complete only the sections relevant to the change you are making. Indicate the type of change you would like to make.**

- Name change - complete sections 1, 2, 3 and 7
- Beneficiary change - complete sections 1, 2, 4, and 7
- Address change - complete sections 1, 2, 5 and 7
- Other change - complete sections 1, 2, 6 and 7

## Section 2

### Your personal information

If you do not know your member number, your Plan Administrator will provide it. Please use the member name currently on our records when submitting a name change.

Must be fully completed 

Plan Sponsor/Employer	Group policy number	
Member number	Customer number	
Last name of member (as listed currently)	First name	Middle initial

## Section 3

### Your change of name

Last name of member	First name	Middle initial
Witness/Plan Administrator's signature		Date signed (dd/mmm/yyyy)

## Section 4

### Your change of 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 additional beneficiaries. Please sign and date the attachment.

Name	Relationship	Percentage of proceeds
		%
		%
		%
<b>Total must equal 100%</b>		<b>%</b>

The above beneficiary designations are considered revocable unless you write "irrevocable" in the chart above.

#### For Quebec only:

The designation of a spouse as a 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
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As current irrevocable beneficiary, I hereby consent to the change in beneficiary indicated in Section 4.

Irrevocable beneficiary's signature (if required)	Date signed (dd/mmm/yyyy)
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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.

A copy, fax, scan or image of the beneficiary designation in this form is as valid as the original.

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

**Section 5**

**Your change of contact information**

Mailing address (number, street and apt. number)				
City	Province	Postal code	Telephone number	Ext
Email				

**Section 6**

**Other changes**

**Section 7**

*You must sign to authorize ANY of the above changes.*

**Please sign here**

Member's signature	Date signed (dd/mmm/yyyy)
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**Mailing instructions**

Send your completed forms to the address below.

**If you live outside of Quebec:**

**Manulife Financial**  
Attn: GRS Client Services  
P.O. Box 396  
Waterloo, ON N2J 4A9  
Fax: 1-866-945-5110

**If you live in Quebec:**

**Manulife Financial**  
Group Retirement Solutions  
2000 Mansfield, Suite 1410  
Montréal, QC H3A 3A2  
Fax: 1-866-945-5109