

ACCIDENTAL DEATH BENEFICIARY DESIGNATION

Please print clearly and complete this form, in INK. Please keep a copy of the completed form for your records and send the original to The Canada Life Assurance Company at the address provided on bottom of page 2.

1. General Enrolment Information	Policy number: _____ ID number: _____ Policyowner name (print): _____ <div style="display: flex; justify-content: space-between; font-size: small;"> last name first name middle initial </div>												
2. Beneficiary Designation <small>This section must be completed to designate a beneficiary for your death benefit under the accidental death and dismemberment and specific loss benefit rider, if applicable.</small> <small>An original or copy of this form will be required for a life claim.</small> <small>Crossed out beneficiary designations must be initialed.</small> <small>Please print clearly in INK.</small>	<p>I hereby revoke all previous beneficiary designations and designate the following as beneficiary(ies).</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Primary Beneficiary</th> <th style="text-align: center; border-bottom: 1px solid black;">Percent allocated</th> <th style="text-align: center; border-bottom: 1px solid black;">Relationship to policyowner</th> </tr> </thead> <tbody> <tr> <td style="border-bottom: 1px solid black;"> <div style="display: flex; justify-content: space-between; font-size: small;"> last name first name middle initial </div> </td> <td style="border-bottom: 1px solid black; width: 15%;"></td> <td style="border-bottom: 1px solid black; width: 15%;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;"> <div style="display: flex; justify-content: space-between; font-size: small;"> last name first name middle initial </div> </td> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;"> <div style="display: flex; justify-content: space-between; font-size: small;"> last name first name middle initial </div> </td> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> </tr> </tbody> </table> <p>To be divided as follows: <input type="checkbox"/> As per the percentage indicated above, or <input type="checkbox"/> In equal shares to the survivor(s)</p> <p>You may change this beneficiary designation at any time upon notice to Canada Life. If you wish to make the beneficiary designation irrevocable (meaning you may not change the designation or make certain changes to your coverage under the plan without the written consent of the beneficiary) please complete form M6348.</p> <p>Note: Where Quebec law applies and you have designated your married spouse or civil union spouse as beneficiary, the designation will be irrevocable unless you check the box marked "Revocable", below.</p> <p>I hereby make the above beneficiary designation: <input type="checkbox"/> Revocable, I may change this beneficiary designation at any time</p> <p>For Quebec Applicants Only - Benefits payable under this plan to a beneficiary who, at the time payment is to be made, is a minor or lacks legal capacity, will be paid to their tutor(s) or curator(s), unless a valid trust has been established for the benefit of the beneficiary, by Will or by separate contract, to receive any such payment and Canada Life has been provided notice of the trust. If a valid trust has already been established, designate the trust as the beneficiary in this section. Before designating a trust, you should seek legal advice.</p>	Primary Beneficiary	Percent allocated	Relationship to policyowner	<div style="display: flex; justify-content: space-between; font-size: small;"> last name first name middle initial </div>			<div style="display: flex; justify-content: space-between; font-size: small;"> last name first name middle initial </div>			<div style="display: flex; justify-content: space-between; font-size: small;"> last name first name middle initial </div>		
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3. Contingent Beneficiary Designation <small>If you wish to appoint a contingent beneficiary in the event that there are no surviving primary beneficiaries at the time of your death, please complete this section.</small>	<p>If there are no surviving beneficiaries at the time of my death, I declare that the following Contingent Beneficiaries shall receive the proceeds. If there are no surviving Contingent Beneficiaries at the time of my death, the proceeds shall be paid to my estate.</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Contingent Beneficiary</th> <th style="text-align: center; border-bottom: 1px solid black;">Percent allocated</th> <th style="text-align: center; border-bottom: 1px solid black;">Relationship to policyowner</th> </tr> </thead> <tbody> <tr> <td style="border-bottom: 1px solid black;"> <div style="display: flex; justify-content: space-between; font-size: small;"> last name first name middle initial </div> </td> <td style="border-bottom: 1px solid black; width: 15%;"></td> <td style="border-bottom: 1px solid black; width: 15%;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;"> <div style="display: flex; justify-content: space-between; font-size: small;"> last name first name middle initial </div> </td> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;"> <div style="display: flex; justify-content: space-between; font-size: small;"> last name first name middle initial </div> </td> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> </tr> </tbody> </table> <p>To be divided as follows: <input type="checkbox"/> As per the percentage indicated above, or <input type="checkbox"/> In equal shares to the survivor(s)</p> <p>You may change this beneficiary designation at any time upon notice to Canada Life. If you wish to make the beneficiary designation irrevocable (meaning you may not change the designation or make certain changes to your coverage under the plan without the written consent of the beneficiary) please complete form M6348.</p> <p>Note: Where Quebec law applies and you have designated your married spouse or civil union spouse as beneficiary, the designation will be irrevocable unless you check the box marked "Revocable", below.</p> <p>I hereby make the above beneficiary designation: <input type="checkbox"/> Revocable, I may change this beneficiary designation at any time</p> <p>For Quebec Applicants Only - Benefits payable under this plan to a beneficiary who, at the time payment is to be made, is a minor or lacks legal capacity, will be paid to their tutor(s) or curator(s), unless a valid trust has been established for the benefit of the beneficiary, by Will or by separate contract, to receive any such payment and Canada Life has been provided notice of the trust. If a valid trust has already been established, designate the trust as the beneficiary in this section. Before designating a trust, you should seek legal advice.</p> <p>For All Other Applicants - If designating a beneficiary who is a minor or who lacks legal capacity you may wish to appoint a trustee/administrator by completing form M6242. This appointment may not be suitable for all purposes. Before designating a trustee, you should seek legal advice.</p>	Contingent Beneficiary	Percent allocated	Relationship to policyowner	<div style="display: flex; justify-content: space-between; font-size: small;"> last name first name middle initial </div>			<div style="display: flex; justify-content: space-between; font-size: small;"> last name first name middle initial </div>			<div style="display: flex; justify-content: space-between; font-size: small;"> last name first name middle initial </div>		
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