

## Group Benefits Beneficiary Designation

All sections of this page should be completed as it will replace any prior designations.

<b>1. Plan member information</b>	Plan sponsor name: _____		Plan contract number: _____	Plan member certificate number: _____
	Plan member name (last, first and middle initial): _____		Province of residence: _____	Date of birth (dd/mmm/yyyy): _____
<b>2. Primary beneficiary</b>  List all primary beneficiaries for Basic Life and/or Basic Accidental Death.  Percentages must total 100% to be valid.	Name of beneficiary (last, first and middle initial): _____	Date of birth (dd/mmm/yyyy): _____	Relationship to plan member: _____	Percentage: _____ %
	Name of beneficiary (last, first and middle initial): _____	Date of birth (dd/mmm/yyyy): _____	Relationship to plan member: _____	Percentage: _____ %
	Name of beneficiary (last, first and middle initial): _____	Date of birth (dd/mmm/yyyy): _____	Relationship to plan member: _____	Percentage: _____ %
<b>Irrevocability</b>	Note: If beneficiary is shown as irrevocable, his/her consent is required to change it. Include a signed and dated consent with this form. <b>You are responsible for ensuring the validity of your designation.</b>		<b>For Quebec residents only</b> In Quebec, the designation of your spouse as beneficiary is irrevocable unless otherwise specified.	If spouse is beneficiary, the designation is: <input type="radio"/> Revocable <input type="radio"/> Irrevocable
<b>3. Optional coverage (if applicable)</b>  Plan contract number: _____  List all beneficiaries for Optional Life and/or Optional Accidental Death.	Name of beneficiary (last, first and middle initial): _____	Date of birth (dd/mmm/yyyy): _____	Relationship to plan member: _____	Percentage: _____ %
	Name of beneficiary (last, first and middle initial): _____	Date of birth (dd/mmm/yyyy): _____	Relationship to plan member: _____	Percentage: _____ %
	Name of beneficiary (last, first and middle initial): _____	Date of birth (dd/mmm/yyyy): _____	Relationship to plan member: _____	Percentage: _____ %
<b>Irrevocability</b>	Note: If beneficiary is shown as irrevocable, his/her consent is required to change it. Include a signed and dated consent with this form. <b>You are responsible for ensuring the validity of your designation.</b>		<b>For Quebec residents only</b> In Quebec, the designation of your spouse as beneficiary is irrevocable unless otherwise specified.	If spouse is beneficiary, the designation is: <input type="radio"/> Revocable <input type="radio"/> Irrevocable
<b>4. Contingent beneficiary</b>	You may wish to designate a contingent beneficiary(ies) to receive any proceeds under this group policy if all of the primary beneficiary(ies), named above for either coverage, should die before you. In that event, a contingent beneficiary will automatically be entitled to the benefit that would have been payable to the primary beneficiary(ies). If you name more than one contingent beneficiary, then the proceeds will be split, evenly, amongst the contingent beneficiaries you choose to name. Should there not be any surviving beneficiaries at the time of your death, the proceeds will be paid to your estate.			
	Name of contingent beneficiary (last, first and middle initial): _____	Date of birth (dd/mmm/yyyy): _____	Relationship to plan member: _____	
	Name of contingent beneficiary (last, first and middle initial): _____	Date of birth (dd/mmm/yyyy): _____	Relationship to plan member: _____	
<b>5. Trustee appointment</b>	Complete if any beneficiary named is under the age of majority. I appoint _____ as Trustee to receive any amount due to any beneficiary under the age of majority (not applicable in Quebec).			
<b>6. Authorization and consent</b>  Due to the legal significance of a beneficiary appointment this designation must be signed and dated to be valid.  A copy, fax, scan or image of the beneficiary designation in this form is as valid as the original.	Before you review your beneficiaries, read the information below. By signing below, you're agreeing to remove any current revocable beneficiaries and replace them with the new ones you named above. <b>Your Privacy</b> We collect, use, and disclose the personal information provided for the purposes of processing your request. We disclose your personal information to our employees, agents, representatives, financial institutions, and other parties with whom we deal in issuing and administering your products and services, now and in the future. Also, we disclose your personal information to service providers who require this information to perform their services for us (for example data processing, programming, data storage, and investigative agencies). Unless there are contractual limitations, your personal information may be accessed or transferred within or outside Canada and may be subject to the laws of those jurisdictions. Plan member signature: _____			
	You may withdraw your consent, subject to legal and contractual restrictions. You also have the right to access and correct your personal information maintained in our files. For more information, you can review our Canadian Privacy Policy at <a href="http://Manulife.ca">Manulife.ca</a> or email us at <a href="mailto:Canada_Privacy@manulife.ca">Canada_Privacy@manulife.ca</a> . Questions? Please phone our customer service centre at 1-800-268-6195. <b>Your email</b> By giving us your email address, you're permitting us to email you. You understand email correspondence may contain personal information including, medical, employment, and financial information, and is not yet a secure means of communication. If your email address changes, it's up to you to let us know. You can revoke the use of your email address at any time by removing your email address online or contacting Manulife.			Date signed (dd/mmm/yyyy): _____

Manulife assumes no responsibility for the validity or sufficiency of the content provided by you. The items ‘you’ and ‘yours’ refer to the plan member, the term “Plan Sponsor” refers to the entity that offers the group benefits plan, such as an employer.

**What is the purpose of a beneficiary?**

If you intend for some or all of your death benefit to go to specific individuals, it is important to make sure that you plan ahead and select those beneficiaries. Having an up-to-date beneficiary designation will make this possible by listing your primary and contingent beneficiaries and intended allocations.

**Beneficiary:** the person, people or entity who will receive any death benefit from the basic or optional coverage you have selected through your group benefits plan that becomes payable upon your death. Basic and optional beneficiaries may differ.

**Types of beneficiary – Primary vs. Contingent**

**Primary:** the person, people or entity you choose to receive the death benefits. If you choose more than one beneficiary, you will need to indicate what percentage of the benefit you would like each person to receive. When multiple primary beneficiaries are named, the total of the percentages allocated to each primary beneficiary must add up to 100%.

**Contingent:** the person, people or entity you designate to receive the death benefits if all of the primary beneficiaries die before you. If you select more than one contingent beneficiary, the benefit will be split evenly between the contingent beneficiaries.

**What happens to the death benefit when...**

The primary beneficiary dies before you and no contingent beneficiary is named.	The death benefit will be paid to your estate.
The primary beneficiary dies before you, but there is a contingent beneficiary(ies) designated.	The benefit will be paid to the contingent beneficiary(ies).
You assign two primary beneficiaries, and one beneficiary dies before you, and you have not updated your Beneficiary Form information.	The entire death benefit that would have been paid to the deceased beneficiary will be paid to the surviving primary beneficiary.

**Irrevocable vs. Revocable**

**Irrevocable:** the beneficiary you choose cannot be changed without the written permission of that individual.  
For example, if you choose your spouse or partner to be the designated beneficiary and you end up separating, you will not be able to change the beneficiary designation without a completed release form from them.

**In Quebec, naming your spouse (must be a civil union) as a beneficiary automatically means that he/she is an irrevocable beneficiary, unless you specify otherwise or divorce.**

**Revocable:** A revocable beneficiary means that the beneficiary you choose can be changed at any time without the permission of that individual.  
For example, if you choose your spouse or partner to be the designated beneficiary and you end up separating, you can then change that beneficiary designation without asking for that person's permission.

**Naming a minor as a beneficiary**

If a benefit becomes payable to a minor who is named as a primary or contingent beneficiary, the benefit can only be paid on behalf of the minor to a trustee or guardian for property, otherwise it will be paid into court to be held until the beneficiary has reached the age of majority for your specific province. It is important therefore, if you are choosing a beneficiary who is a minor at the time of the designation to also name a trustee.

If you are a Quebec resident, the parents are considered tutors of their child.  
If a minor has been designated as an irrevocable beneficiary, the policy is automatically frozen until the beneficiary has reached the age of majority for your specific province. A parent, guardian or trustee cannot consent to a beneficiary change on behalf of a minor.

**Minor:** a person named as a beneficiary who is under the age of majority for your specific province.  
**Trustee:** a person appointed by you to hold the minor's proceeds in trust until the minor reaches the age of majority for your specific province.  
**Tutor:** a tutor acts like a trustee.