

Beneficiary Form

As the Policyowner, you have the option to designate up to five beneficiaries to receive benefits payable under your policy on your death.

The option to designate a beneficiary is subject to the conditions listed below.

Conditions

The following conditions apply:

- Only the Policyowner can sign the beneficiary form; and
- You can designate a maximum of five beneficiaries under your policy; and
- Designations must be a natural person; and
- If a designation pre-deceases you, the portion otherwise payable to them will be payable to your estate unless you update your beneficiary designation; and
- If at time of payment, a designated beneficiary is a minor, the payment will be made to the minor's legal guardian or trust for the benefit of the minor; and
- Payment of benefits will be made on the basis of the latest valid designation received by us prior to the death of the Policyowner; and
- You may change the designation at any time by properly completing and signing a new beneficiary form (available at northcover.ca) and returning it to North Cover. The variation takes effect when it is received by North Cover.

Helpful tips when completing the beneficiary form

- If you make an alteration or correction to the form, please ensure you initial each change.
- Please note that when completing the proportion of benefit section, it must equal 100%; we cannot accept dollar amounts, fractions, or statements such as 'All', 'Half', or 'The Rest'.
- We require complete phone numbers for all nominees, except if they are under 18 years of age.
- We are unable to accept any additional instructions on the form, other than the fields included.

Example of how to designate a beneficiary(ies)

Full Name of Beneficiary	Address	Phone Number	Date of Birth	Relationship to Policyowner	Proportion of Benefit (%)
Mr Travis Smith	1 Sample Street North York ON M2N 5Y7	250 123 4567	1980 / 05 / 01	Brother	30%
Ms Sarah Jones	8 Sample Street North York ON M2N 5Y7	250 891 0112	1995 / 06 / 30	Daughter	70%
			/ /		%
			/ /		%
			/ /		%
Your policy number	750123456	Total (must add up to 100%)			100%
Name of Policyowner	Mrs Sandi Jones				
Signature of Policyowner	Sandi Jones	Date:	2020 / 06 / 11		

Privacy

GFSC Life Inc. (“we”, “us” or “our”) collects the following personal information in order to record your designated beneficiaries and to assist in the management of future claims. You confirm that you have gained consent from the individuals to provide this information. This information will be shared with your insurer and any of its third party service providers, including claims assessors should you lodge a claim under your Policy. If you fail to provide the requested information, or do not provide the information in full, your designation will be deemed invalid and will not be processed. We may send your personal information to third party service providers located in jurisdictions outside of Canada. You can obtain a copy of our Privacy Policy, which contains information about how we collect, use, and disclose Personal Information, how to request a correction of information or how to lodge a complaint, on our website, northcover.ca/privacy-policy, or you can request a copy by contacting us on **1-844-203-8523** Monday to Friday between 8am and 8pm ET.

Full Name of Beneficiary	Address	Phone Number	Date of Birth YYYY/MM/DD	Relationship to Policyowner	Proportion of Benefit (%)
			/ /		%
			/ /		%
			/ /		%
			/ /		%
			/ /		%
Your policy number	Total (must add up to 100%)				%
Name of Policyowner					
Signature of Policyowner (Handwritten signature only)				Date: YYYY/MM/DD	/ /

Please return this form to North Cover by emailing it to support@northcover.ca