

# EMPLOYEE BENEFIT PROGRAM TRUSTEE NOMINATION FOR A MINOR BENEFICIARY FORM

(Date)

## **PROCESSING INSTRUCTIONS:**

Use this form to identify a trustee when appointing a minor as a beneficiary for your life insurance coverage under The MEARIE Group program.

You can name an individual (an "administrator" or "trustee") other than the child's parents, or other legal guardian when applicable, to manage the proceeds on their behalf until the child reaches the age of majority (age 18 in Ontario). Before designating a trustee we recommend you consult with a legal advisor and with the proposed trustee.

If you are separated or divorced you can name someone other than the child's other parent as the administrator/trustee which is allowable <u>unless the minor beneficiary resides in Quebec</u>. Quebec courts have ruled that when a death benefit under a life insurance policy is payable to a minor beneficiary, it must be paid to the child's parent(s) (or other legal guardian when applicable) and not to any other administrator/trustee named under the life insurance policy.

This form must be completed in ink and should accompany your enrolment or change form identifying the minor beneficiary designation.

Please send the original signed form to The MEARIE Group - 3700 Steeles Avenue West, Suite 1100, Vaughan, Ontario L4L 8K8

### GENERAL INFORMATION (Part A)

MPLOYER NAME		DIVISION NUMBER		
EMPLOYEE NAME			ID NUMBER	CLASS
Last Name	First Name	Middle Name		

### **BENEFICIARY DESIGNATION – TRUSTEE NOMINATION (Part B)**

Please PRINT your minor beneficiary's name in FULL. If more than one minor beneficiary is named, indicate the percentage of the proceeds for each beneficiary. When designating a minor child (someone who has not attained the age of majority as defined by provincial legislation) as a beneficiary for your life insurance under The MEARIE Group program, a trustee must be appointed.

	Middle Name	Last Name	Date of Birth (MM/DD/YY)	Relationship	% Share
	while the beneficiary(ies) named above the second	ve are a minor, are to be made	e to the trustee below:		
		ve are a minor, are to be made	e to the trustee below: (Last Name)	-	
lame:				-	

### **EMPLOYEE AUTHORIZATION (Part C)**

(Signature)

At The MEARIE Group, we recognize and respect every individual's right to privacy. We use the personal information provided to determine your eligibility for coverage and administer the group benefit plan.