

FORM 04 Beneficiary Designation/ Change Form

Please complete all information requested below, sign and return to:
AFBS, 1000 Yonge Street, Toronto, Ontario M4W 2K2

AFBS: 1000 Yonge Street
Toronto, ON M4W 2K2
PHONE: 416-967-6600 1-800-387-8897
FAX: 416-967-4744 1-888-804-8929
EMAIL: info@afbs.ca

AFBS WEST: 300 - 380 2nd Avenue West
Vancouver, BC V5Y 1C8
PHONE: 604-801-6550 1-866-801-6550
FAX: 604-801-6580
EMAIL: afbswest@afbs.ca



Please be sure to sign and date before returning the completed form to Actra Fraternal Benefit Society (AFBS). Completed forms may be scanned and emailed, faxed or mailed to AFBS. If you have any questions concerning this form, please contact AFBS. We recommend that you review this designation with your financial/legal advisors.

SECTION 1 – Planholder Information (please print)

[Reset Form](#)

Member Name (Last, First, Middle Initial)		Date of Birth DD MM YYYY	Telephone Number
Your Account Number 4501 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	ACTRA/WGC Number (if applicable)		
Please provide your Legal Name if different than name above.		Legal Name (Last, First, Middle Initial)	
I participate in the following program (check one) <input type="checkbox"/> Members' Insurance Program <input type="checkbox"/> Employer Benefits Program <input type="checkbox"/> Writers' Coalition Program <input type="checkbox"/> Arts & Entertainment Plan* <input type="checkbox"/> Other _____			

SECTION 2 – Planholder Declaration

Please check all Plans for which you are designating your beneficiary(ies) listed in Section 3. Please use separate forms if you wish to designate different beneficiaries for different plans.

I, the undersigned, do hereby revoke any prior designation of beneficiary made in respect of the benefits indicated. I do declare and direct that any proceeds from these benefits be paid to the beneficiary named below in the event of my death, if permitted by law. I understand that this designation will apply to all plan(s) under which I may be eligible for death benefits should I fail to specify the applicable plan(s) here.

Plans

Life and Accidental Death & Dismemberment (AD&D) Insurance
 RRSP
 TFSA

– Québec Residents Only

Under Québec legislation, the irrevocable beneficiary rule does not apply to a common-law spouse. If you have designated your legal spouse as beneficiary, that designation will automatically become irrevocable unless you indicate by initialing in the space provided that you wish to have the right to change your beneficiary in the future.

 Initial

SECTION 3 – Primary Beneficiary Information (see page 3 for explanations and terminology)

If you are appointing more than two Primary Beneficiaries, please include a signed and dated separate letter which outlines your designations.

Primary (100%) or Joint Primary Beneficiary (1) - _____ %
 Joint Primary Beneficiary (2) - _____ % (must equal 100%)

Name (Last, First, Middle Initial)	Relationship	Name (Last, First, Middle Initial)	Relationship
Street Address		Street Address	
City	Province	Postal Code	City
			Province
			Postal Code





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SECTION 4 - Contingent Beneficiary Information - if applicable (see page 3 for explanations and terminology)

If you are appointing more than two Contingent Beneficiaries, please include a signed and dated separate letter which outlines your designations.

Contingent (100%) or Joint Contingent Beneficiary (1) - _____ % Joint Contingent Beneficiary (2) - _____ % (must equal 100%)

Name (Last, First, Middle Initial)			Relationship			Name (Last, First, Middle Initial)			Relationship		
Street Address						Street Address					
City		Province		Postal Code		City		Province		Postal Code	

SECTION 5 - Declaration Appointing Trustee for a Minor Beneficiary

NOTE: If any beneficiary is a minor, you may wish to complete the following. In some provinces your spouse is not automatically the trustee for your minor children. The age of majority is not standardized and you may wish to verify the age of majority in the province in which the minor child resides.

Name (Last, First, Middle Initial)			Relationship		
Street Address					
City		Province		Postal Code	

SECTION 6 - Special Instructions

SECTION 7 - Authorization

I reserve the right to change this designation of beneficiary, unless prohibited by law. A photocopy or facsimile of this designation shall be as valid as the original.

Planholder's Signature (required)	Date DD MM YYYY
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Please see the **Important Information about the AFBS Beneficiary Designation/Change Form page** for additional details. This form is a legal document and it is imperative that your designation is complete and reflects your wishes.





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Important Information about the AFBS Beneficiary Designation/Change Form

1. Your Account Number, which is a 10-digit number beginning with '450', is shown on all Member Account statements and Members' Insurance Program statements issued by AFBS. This is a unique identifier, used only by AFBS and by which we manage your financial accounts.
2. If you wish to name your estate as beneficiary, please indicate "ESTATE" on the beneficiary name line in Section 3.
3. If you wish to name more than two Primary or Contingent Beneficiaries, please include a signed and dated separate letter which outlines your designations.
4. If any beneficiary is a minor child, please also complete Section 5 - Declaration Appointing a Trustee for a Minor Beneficiary.
5. The "Special Instructions" section is for your use if you list more than one beneficiary and additional details are required concerning the disposition of funds. **A separate, signed and dated letter may be included.**

For Planholders in all provinces except Québec, the designation of a beneficiary is revocable unless otherwise stipulated.

For Planholders who reside in the Province of Québec, the designation of a legal spouse is irrevocable unless otherwise stipulated or if prevented by law. In the case of any other beneficiary, the designation is revocable unless otherwise stipulated.

TERMINOLOGY

(legal or common-law), is defined as a person who is living with you in a conjugal relationship. "Common-law Spouse" means a person of the same or opposite sex who is publicly represented as being your spouse and who has been living with you continuously for at least the last two (2) years except where otherwise required by provincial legislation. Within Québec, beneficiary designation statutes differentiate between the legal and common-law spouse definition. See the **"IMPORTANT SPECIAL NOTE for Québec residents only" on the Beneficiary Designation/Change Form.**

Most individuals designate one person as their beneficiary (Primary Beneficiary) and may appoint a Contingent Beneficiary to address the situation where the Primary Beneficiary predeceases the planholder. When it is appropriate to have up to two Primary or Contingent Beneficiaries, you may use this form. Alternatively, specify that proceeds are payable to your Estate and address any distribution within your Will. Please speak with your legal advisor as to which approach best suits your interests. **When Joint Primary Beneficiaries and Contingent Beneficiary(ies) are designated, it is IMPORTANT that you specify the rights of each Beneficiary(ies) in the Special Instructions.**

Primary Beneficiary - when only one person is appointed to receive the proceeds of the benefits indicated.

Joint Primary Beneficiary - when two people are appointed to receive the proceeds of the benefits indicated.

The intended proceeds of a Joint Primary Beneficiary who predeceases you will be payable to your Estate unless a Contingent Beneficiary has been appointed or instructions to the contrary are included in the Special Instructions (i.e. payable to the remaining Joint Primary Beneficiary).

Contingent Beneficiary - the individual(s) who will receive the proceeds of the benefits indicated should the named Primary Beneficiary or Joint Primary Beneficiaries either predecease you or do not survive you for a specified number of days.

The Contingent Beneficiary will receive the proceeds of the benefits indicated if the Primary Beneficiary predeceases you. Where there are Joint Primary Beneficiaries, please specify the circumstances under which the Contingent Beneficiary is eligible to receive benefits. (i.e. upon the death of the Joint Primary Beneficiary or all Joint Primary Beneficiaries.)

If you have any questions concerning this form, please contact AFBS or your professional advisors.

