

FINANCIAL INSTITUTION INFORMATION

Financial Institution Name (the "Financial Institution") and Address		Account Number(s) (the "Account")
		Phone
Email	Website	Fax

PERSONAL INFORMATION (Complete all fields except any that are not applicable.)

Name	Membership No. <input type="checkbox"/> N/A	SIN
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I can withdraw any consent I give below for the collection, use, and disclosure of my personal information at any time by contacting the Financial Institution. I may be asked to provide a request in writing. If I withdraw my consent, I understand that the Financial Institution may no longer be able to provide me, or the third party for whom I am acting, with products and/or services.

The Financial Institution's privacy policy can be obtained by contacting a Financial Institution representative.

Social Insurance Number (SIN) Consent

I understand that my social insurance number (SIN) will be collected, used, and disclosed as required by law for income tax reporting purposes. Providing my SIN for purposes not required by law is optional.

The Financial Institution and its agents and representatives may use my social insurance number to keep my records separate from other individuals with the same name and to identify me (including for credit reporting purposes, as applicable).

- I consent.
- I do not consent. I understand that the Financial Institution may not be able to provide me, or the third party for whom I am acting, with certain products and/or services.

Marketing Consent

The Financial Institution and its agents and representatives may use and/or disclose my personal information to determine my suitability and eligibility for products, services, and community events and to market such products, services, and community activities to me, or the third party for whom I am acting, by providing information by any means including mail, electronic message, or in person. The Financial Institution and its agents and representatives may disclose my information to market research firms for the purposes of analysis and/or conducting surveys.

- I consent.
- I do not consent. I understand that my refusal to consent means the Financial Institution is unable to include me in its marketing activities, including providing me with information about its products and services, and/or community activities that may be of interest to me, or the third party for whom I am acting.

Full Personal Credit Report Consent

I consent to the Financial Institution obtaining my full personal credit report from credit reporting agencies from time to time for the purposes of assessing my current and ongoing creditworthiness, to update my personal information, and for risk assessment purposes. This consent shall be effective as of the date of this consent and shall be valid so long as I am authorized to sign or transact on an account. The Financial Institution may provide information about my credit history and other personal information to other financial institutions and credit reporting agencies to update my credit information and maintain the integrity of the credit reporting system.

- I consent.
- I do not consent. I understand that refusal to consent may mean the Financial Institution is unable to provide me, or the third party for whom I am acting, with products or services that involve provisional credit, such as a credit product or reduced deposit hold period.

PERSONAL INFORMATION CONSENT CONTINUED**Personal Information Consent**

I consent to the Financial Institution and its agents and representatives collecting, using, and disclosing my personal information to

- a) verify my identity and maintain records of my personal information, in accordance with the Financial Institution's requirements to manage its risk arising from its operations or as otherwise required by law, including money laundering laws and regulations, which may include checking my identity against watch lists;
- b) facilitate the collection of debts owing by me, or for which I am financially responsible, to the Financial Institution;
- c) protect me, the third party for whom I am acting, or the Financial Institution from error and fraud, such as identity theft;
- d) process this Personal Contract and set up, manage, administer, and maintain, as applicable, my membership and Account; and
- e) keep my records separate from others with the same name.

I consent to the Financial Institution communicating with me, or the third party for whom I am acting, by any means, including mail, in person, email, or otherwise for administrative purposes related to products and services which I currently have or may request in the future.

I understand that my personal information may be transferred to service providers located in other countries, and that in such case my personal information may be accessible by law enforcement and national security agents in those countries.

X

Signature	Name	Date
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X

Witness Signature	Name	Date
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