

FORM 04 Beneficiary Designation/Change

Please complete all information requested below,
sign and return to Actra Fraternal Benefit Society (AFBS).

AFBS: 1000 Yonge Street
Toronto, ON M4W 2K2
PHONE: 416.967.6600 1.800.387.8897
FAX: 416.967.4744 1.888.804.8929
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AFBS WEST: 300 - 380 2nd Avenue West
Vancouver, BC V5Y 1C8
PHONE: 604.801.6550 1.866.801.6550
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IT IS RECOMMENDED THAT YOU REVIEW ANY DESIGNATION WITH YOUR FINANCIAL/LEGAL ADVISORS TO ENSURE THERE IS NO CONFLICT WITH YOUR ESTATE PLANNING.

A beneficiary designation is one way for you to plan ahead and specify who you wish to receive the proceeds of the benefits provided by AFBS, should something happen to you. If you have any questions about this form, please contact AFBS. The form is complete only once it has been signed by you, dated and submitted to AFBS. Completed forms may be scanned and emailed, faxed or mailed to AFBS.

SECTION 1 – Planholder Information *(please print)*

[Reset Form](#)

Member Name (Last, First, Middle Initial)		Date of Birth DD MM YYYY	Telephone Number
Your AFBS 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)	
Legal Name if different than name above	Legal Name (Last, First, Middle Initial)		

I participate in the following program (check one)

Members' Insurance Program
 Employer Benefits Program
 Writers' Coalition Program
 Arts & Entertainment Plan*
 Other _____

Please check all plans for which you are designating your beneficiary(ies) listed in *SECTION 2*. Please use separate forms if you wish to designate different beneficiaries for different plans.

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

*any designation will apply to Life Insurance only when AD&D benefits are not provided through the policy under which you are insured.

SECTION 2 – 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 letter outlining 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

Québec Residents Only – Important Requirement When You Designate Your Spouse as Beneficiary

In Québec, naming your spouse by marriage or civil union as beneficiary automatically means that (s)he is an irrevocable beneficiary unless you specify otherwise or divorce. "Irrevocable" means that you cannot change the beneficiary without the written permission of that person. The irrevocable beneficiary rule does not apply to a common-law spouse.

IMPORTANT: If you have appointed your spouse as beneficiary, you must confirm that the designation is
 Revocable
 Irrevocable

You are responsible for ensuring the validity of your designation.



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SECTION 3 - 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 letter outlining 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 4 - Appointment of a Trustee for a Minor Beneficiary

Benefits cannot be paid directly to a minor beneficiary. **If you reside outside of Québec** it is important when you choose a beneficiary who is a minor at the time of designation that you also name a trustee. In Québec, the parents are considered tutors (acts as a trustee) for their children.

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

SECTION 5 - Special Instructions

Empty text area for special instructions.

SECTION 6 - Declaration and Authorization

I, the undersigned, do hereby revoke and any designation of beneficiary made in respect of the plans indicated.

I do declare and direct that any proceeds from these plans be paid to the beneficiary named above 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) in *SECTION 1*.

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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AFBS is committed to protecting the confidentiality of the personal information we collect from you and will use this information to process any claim for death benefits.

Please see the **Important Information about Form 04: Beneficiary Designation/Change** page for additional details.
This form is a legal document and it is imperative that your designation is complete and reflects your wishes.

**Important Information about the *Form 04: Beneficiary Designation/Change***

1. If you wish to name your estate as beneficiary, please indicate "ESTATE" on the beneficiary name line in *SECTION 2*.
2. If you wish to name more than two Primary or Contingent Beneficiaries, please include a signed and dated letter outlining your designations.
3. If any beneficiary is a minor please also complete *SECTION 4 - Appointment of a Trustee for a Minor Beneficiary*.
4. The "Special Instructions" section is for your use when listing more than one beneficiary and additional details are required regarding the allocation 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

"Spouse" (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. See *SECTION 2 Québec Residents Only - Important Requirement*.

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.)

Irrevocable - the beneficiary you choose cannot be changed without the written permission of that person.

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