

THE ANGLICAN CHURCH OF CANADA

THE GENERAL SYNOD PENSION PLAN APPOINTMENT OF BENEFICIARY FORM

MEMBER INFORMATION

Name (<i>first, initial, last</i>)	Date of birth (mmm/dd/yyyy)
Diocese/Employer	Social Insurance Number

PRIMARY BENEFICIARY(IES)

Pension legislation requires pre-retirement death benefits to be paid to your eligible spouse/partner unless a waiver is signed.

ESTATE <input type="checkbox"/>	
OR	
Name (<i>first, initial, last</i>)	Date of birth (mmm/dd/yyyy)
Address	
Relationship to Member	% Share of Benefits - if not 100% or divided evenly
Name (<i>first, initial, last</i>)	Date of birth (mmm/dd/yyyy)
Address	
Relationship to Member	% Share of Benefits - if not 100% or divided evenly

If there are more than two beneficiaries, please attach list or additional copies of this form available at the link <https://www.anglicanpension.ca/forms/>

TRUSTEE FOR UNDERAGE BENEFICIARIES - only if naming a beneficiary under the age of 18

Name (<i>first, initial, last</i>)	Date of birth (mmm/dd/yyyy)
Address	
Relationship to Member	

BACK-UP BENEFICIARY(IES) - if no beneficiary named above is alive to receive death benefits

Name (<i>first, initial, last</i>)	Date of birth (mmm/dd/yyyy)
Address	
Relationship to Member	

If there are more than one back-up beneficiaries, please attach list or additional copies of this form available at the link <https://www.anglicanpension.ca/forms/>

Member's Signature	Witness' Signature	Date (mmm-dd-yyyy)
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