Beneficiary nomination

Sun Life Financial

Clear

Keeping your information confidential

Sun Life Assurance Company of Canada, a member of the Sun Life Financial group of companies, is committed to keeping your information confidential. We may leverage our strengths in our worldwide operations and in our negotiated relationships with third-party providers and reinsurers who, in some instances, may be located in jurisdictions outside Canada. Your personal information may be subject to the laws of those foreign jurisdictions. Sun Life Financial's operations worldwide and our third-party providers are required to protect the confidentiality of your personal information in a manner that is consistent with our privacy policy and practices.

To find out about our Privacy Policy, visit our website at *www.sunlife.ca*, or to obtain information about our privacy practices, send a written request by email to *privacyofficer@sunlife.com*, or by mail to Privacy Officer, Sun Life Financial, 225 King St. West, Toronto, ON M5V 3C5.

☐ New ☐ Change

By completing section 2, I revoke all previously nominated beneficiary nominations and make the following nomination, where permitted by law.

If your contract includes optional benefits, complete the Beneficiary Nomination with Optional Benefits form.

Note: If your current beneficiary nomination is irrevocable, your current beneficiary must agree to revoke their rights by completing a Consent by Beneficiary Form.

Please PRINT clearly. Complete the form in ink, sign and date the form on page 2 and return to your plan administrator for handling.

1 Plan member details

Be sure to complete all plan member information.

Plan member's last name	Middle initial	First name

Contract number	Location/billing group number	Plan member ID
50813	50	

2 Beneficiary nomination (to be completed by the plan member)

You must complete the form in ink, sign and date the form.

Be sure to show the beneficiary's first and last name, as well as the relationship to you.

You must initial any changes or deletions. Correction fluid cannot be used.

If you are nominating a beneficiary who is a minor, please see section 4.

NOTE: In Quebec, any amount payable to a minor beneficiary during his/her minority will be paid to the parent(s) or legal guardian on his/her behalf.

Beneficiary for **Employee BASIC Life** and **Accidental Death Benefits (if applicable)**

Last name	First name	Relationship to plan member	Percentage
			%
Last name	First name	Relationship to plan member	Percentage
			%
Last name	First name	Relationship to plan member	Percentage
			%

In Quebec, if you name your legal spouse (married or civil union) as the beneficiary, this beneficiary will be irrevocable unless you check the revocable box. ☐ Revocable beneficiary

If you do not nominate a beneficiary, the proceeds will be paid to your estate.

3 Appointing contingent beneficiaries

If you wish to appoint a Contingent Beneficiary, in the event that there are no surviving beneficiaries at the time of your death, please complete this section.

If there are no surviving beneficiaries at the time of my death, I declare that the following Contingent Beneficiaries shall receive the proceeds. If there are no surviving Contingent Beneficiaries at the time of my death, the proceeds shall be paid to my estate.

Unless I specify otherwise, my Contingent Beneficiary will apply to all benefits for which I have coverage. I revoke all previous Contingent Beneficiary appointments.

Last name	First name	Relationship to plan member	Percentage
			%
Last name	First name	Relationship to plan member	Percentage
			%
Last name	First name	Relationship to plan member	Percentage
			%

In Quebec, if you name your legal spouse (married or civil union) as the beneficiary, this beneficiary will be irrevocable unless you check the revocable box. ☐ Revocable beneficiary

4 Nomination of trustee for minor beneficiary other than Quebec residents

If you wish to designate minor children as beneficiaries, a trustee must be designated.

NOTE: In Quebec, any amount payable to a minor beneficiary during his/her minority will be paid to the parent(s) or legal guardian on his/her behalf.

Any payments becoming due while the beneficiary(s) are a minor* are to be made to

_____ as trustee, or failing such trustee to the duly appointed guardian of such minor child as trustee. Payment to the trustee will discharge the company.

* A minor is a child who has not reached the age of majority as defined by provincial legislation.

5 Authorization and signature

IMPORTANT:
You must sign and date the form.

I authorize Sun Life Assurance Company of Canada, its agents and service providers, its reinsurers and their service providers to collect, use and disclose relevant information about me to underwrite, administer and pay claims.

Plan member signature	Date (yyyy-mm-dd)
X	– –