



THE UNITED CHURCH OF CANADA
BENEFITS CENTRE
3250 Bloor Street West, Suite 200
Toronto, Ontario M8X 2Y4
Tel: 1-855-647-8222

**PENSION PLAN OF THE UNITED CHURCH OF CANADA REGISTRATION NO. 0355230
LOCKED-IN TRANSFER FORM**

MEMBER INFORMATION			
MEMBER NAME (LAST, FIRST)		SIN	
REGISTERED RETIREMENT SAVINGS PLAN NUMBER:			
Locked-in amount		Province of Employment	
Application having been made and received for a Registered Retirement Savings Plan, for funds being transferred from a Registered Pension Plan governed by Federal and/or The Pension Benefits Act of the Applicant's Province of Employment (noted above) and its Regulations, requiring that these funds are only available in the form of a Deferred Life Annuity, or Death Benefit. Any conditions applicable to these funds under such Pension Benefits Act and its Regulations are not changed by reason of such transfer.			
DECLARATION BY FINANCIAL INSTITUTION			
The Financial Institution acknowledges the above, and in consideration of the issuing of the Registered Retirement Savings Plan for the funds being transferred agrees to administer these funds in accordance with the provisions under the Pension Benefits Act of the Applicant's Province of Employment (noted above) and its Regulations which are relevant to the Applicant and such funds, and which include but are not limited to the conditions stated on the reverse side of this form.			
Signed at (city,prov)		this _____ day of	20
Officer of Financial Institution Signature (Print and sign)			
Name and address of Financial Institution			
Witness Name and Address (Print and sign) Witness cannot be the member			
DECLARATION BY MEMBER			
I acknowledge the foregoing, and in consideration of the transfer to a R.R.S.P., on my behalf, of the "LOCKED-IN" funds covered by this application and formerly held in a registered pension plan, of which I was a member, in the amount listed below, agree that the value of said "LOCKED-IN" funds shall not be available to me in any other form than an annuity based on life contingencies and shall continue to be subject to the provisions of the Pension Benefits Act of my Province of Employment (noted above) and its Regulations which are relevant to me and such funds, and which include but are not limited to the conditions stated on the reverse side of this form. This supplement forms part of the Registered Retirement Savings Plan.			
Signed at (city,prov)		this _____ day of	20
Member Signature (Print and sign)			
Witness Name and Address (Print and sign) Witness cannot be the member			



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TRANSFER CONDITIONS

The funds covered by this application and the Financial Institution shall be subject to the provisions of The Pension Benefits Act of the Applicant's Province of Employment (noted on page 1) and its Regulations, which are relevant to such funds, the Applicant and the Financial Institution. The relevant provisions include but are not limited to the following conditions:

1. The Applicant shall not have the right to deregister the Registered Retirement Savings Plan.
2. The Applicant shall not have the right to modify in any way the terms and conditions of the Registered Retirement Savings Plan applied for which would result in its disqualification
3. That such funds shall, subject to subsection (6), not be capable of assignment or commutation, other than in the form of a Death Benefit in respect of an applicant, who as of his/her date of death, has no surviving spouse or common-law spouse.
4. The Financial Institution shall not allow any transfer of such funds to another financial institution unless such other financial institution and the Applicant agree to the same Transfer Conditions as contained herein.
5. The Life Annuity payable to the Applicant if married or party to a common-law relationship at the time the annuity payments begin shall be a joint pension payable during the lives of the Applicant and the spouse or common-law spouse as prescribed in the Pension Benefits Act of the Applicant's Province of Employment (noted on page 1) and its Regulations.
6. Upon marital break-up, the funds so transferred shall be divided between the spouses or common-law spouses in the manner prescribed in the Pension Benefits Act of the Applicant's Province of Employment (noted on page 1) and its Regulations.
7. The financial Institution shall not provide or permit a different amount of Life Annuity or Death Benefit or different options as to the Life Annuity or Death Benefit with respect to such funds, based on differences in sex.
8. The Financial Institution shall abide by and comply with the provisions relevant to the Applicant and such funds under The Pension Benefits Act of the Applicant's Province of Employment (noted on page 1) and its Regulations as they exist from time to time.

INSTRUCTIONS

The following points may help in the completion of the form:

1. The Financial Institution is a trust company, bank, insurance company or such other corporation which has been authorized to issue Registered Retirement Savings Plans under Section 146 of the Income Tax Act of Canada.
2. Only an officer of the Financial Institution may complete the upper half of the form.
3. The former plan member must complete the lower half of the form.
4. When all sections are fully completed, the form should be forwarded to the United Church of Canada Benefits Centre in order for payment to be finalized.
5. Parties involved in the transfer of the "Locked-In" pension funds should retain copies of this form for future reference.