



WORLD FINANCIAL GROUP  
INSURANCE AGENCY  
OF CANADA INC.

## SEGREGATED FUND TRADE TICKET

Dealer: 3057

☐ **FOR FILING PURPOSES ONLY. DO NOT DUPLICATE.**

☐ New Client ☐ Redemption ☐ RED/PUR Conversion  
☐ Existing Client ☐ Switch ☐ Transfer  
☐ Purchase

### SECTION 1 | PLAN REGISTRATION

☐ Individual ☐ Individual - ITF ☐ Joint - JTWROS ☐ Joint - JTIC ☐ Joint - ITF ☐ Corporate ☐ Estate ☐ Formal Trust

### SECTION 2 | PLAN TYPE

☐ Non-Registered ☐ RRSP ☐ RESP ☐ RRIF ☐ LIRA ☐ TFSA ☐ SRSP ☐ RDSP ☐ LIF ☐ OTHER \_\_\_\_\_

Plan ID \_\_\_\_\_

### SECTION 3 | CLIENT INFORMATION

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Social Insurance Number \_\_\_\_\_  
Joint Applicant First Name \_\_\_\_\_ Joint Applicant Last Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Social Insurance Number \_\_\_\_\_  
Street Address \_\_\_\_\_  
City-Town \_\_\_\_\_ Province \_\_\_\_\_ Date of Birth \_\_\_\_\_ Social Insurance Number \_\_\_\_\_  
Postal Code \_\_\_\_\_ Tel. (Residence) \_\_\_\_\_ Tel. (Business) \_\_\_\_\_  
☐ RESP/RDSP/In Trust for/Beneficiary ITF  
☐ Corp. \_\_\_\_\_

### SECTION 4 | TRADING INSTRUCTIONS

**Amount (Amt Type) Legend:** A=All D=Dollars P=Percentage S=Shares T=10% Free Shares M=Matured Shares

Redemption/Switch From

Purchase/Switch To

Fund Code	Amt Type	Amount	Gross/Net	Wire Order #	Fund Code	Amt Type	Amount	Gross/Net	Wire Order #	Sales Charge
Fund Name			Account #		Fund Name			Account #		
Fund Name			Account #		Fund Name			Account #		
Fund Name			Account #		Fund Name			Account #		
Fund Name			Account #		Fund Name			Account #		

Note: New written instructions must be submitted for EACH one time PAC/PAD request.

Transactions processed by fund code only.

### SECTION 5 | FEE DISCLOSURE

For Redemptions, provide amount: \$ \_\_\_\_\_

For purchase, provide Front End (FE) and Initial Sales Charge (ISC)

\_\_\_\_\_ % and/or \$ \_\_\_\_\_

### SECTION 6 | REDEMPTION INSTRUCTIONS Make cheque payable to:

☐ Client ☐ Deposit to bank account as per new void cheque ☐ Deposit to bank account as per existing void cheque  
☐ Forward to Client as per mailing address on file

### SECTION 7 | SOURCE OF FUNDS/SPECIAL INSTRUCTIONS

### SECTION 8 | CLIENT ACKNOWLEDGEMENT AND CONSENT

Did you borrow funds to purchase this investment? ☐ Yes ☐ No If Yes, did you review the disclosure document on the back of this Trade Ticket? ☐ Yes ☐ No

Have you been advised of, and are you comfortable with, all risks associated with leveraged investing? ☐ Yes ☐ No

**I have received, read and understood the Information Folder. I am aware of any and all fees that I may be responsible for.**

Client Initials

I/We the undersigned confirm that I/we have been informed of the disclosures and disclaimers described on the reverse and declare that I/we understand the charges, terms, conditions and provisions stated therein. I/We also acknowledge that I/We have read and agree to the attached pre-authorized debits (PAD's) agreement.

I/We have read and fully understand the "Your Personal Information" section on the reverse and acknowledge and consent to the collection, use and disclosure of my/our personal information by World Financial Group Insurance Agency of Canada Inc. for the purposes identified therein. Your consent, relating to the use of your personal information to provide you with details about other insurance and financial service products, is optional. If you do not wish your personal information to be used for this optional purpose, check here ☐ or you can write to us at: World Financial Group Insurance Agency of Canada Inc. Attn: Privacy Officer, 5000 Yonge Street, Suite 800, Toronto, ON M2N 7E9

Client Signature \_\_\_\_\_ Joint Client Signature (if applicable) \_\_\_\_\_ Signed in the Province of (Required) \_\_\_\_\_ Client Date \_\_\_\_\_

### SECTION 9 | AGENT ACKNOWLEDGEMENT

☐ I confirm that I witnessed the client sign this Trade Ticket and that the client is the individual identified in the associated NAA/KYC Form

**Agent Initials (required)**

Writing Agent - Print Name \_\_\_\_\_ Writing Agent Signature \_\_\_\_\_ Agent # \_\_\_\_\_ Agent % \_\_\_\_\_ Agent Date \_\_\_\_\_

Split Agent - Print Name \_\_\_\_\_ Split Agent Signature \_\_\_\_\_ Split Agent # \_\_\_\_\_ Split Agent % \_\_\_\_\_

**Cheques must be payable to fund company and not directly to an agent.**

**Original - WFG Dealer Connect 2<sup>nd</sup> Copy - Agent File 3<sup>rd</sup> Copy - Client**

# DISCLOSURES AND STATEMENTS

All the details of the contract benefits and provisions that you should know about this segregated fund contract are contained in the Information Folder and the Policy Contract. Please refer to them and review any questions you have with your agent.

Please note that the value of your contract can go up or down subject to the guarantees. Any withdrawals you make will reduce your guarantees. For full details please refer to the appropriate section of the Insurer's Information Folder and the segregated funds contract. Also, note that the contract maturity date establishes when the contract guarantees come into effect.

Segregated funds are investment products. The performance of the investment options available in segregated funds is not guaranteed. You should carefully consider your **tolerance for risk** when you select an investment option. Other critical factors to consider are your **investment time horizon**; your **investment knowledge** and your **investment objective**.

## POINT OF SALE DISCLOSURE

At the time you enter into a segregated fund contract, you must be presented with key documents.

- The **Information Folder** must be delivered to you before you sign the application for the segregated fund. The Information Folder must contain a **Key Facts** document that briefly describes the key features of the contract.
- You may choose to receive these disclosure documents either physically (in person, by mail, or by fax) or electronically (e-mail or viewed online). You must sign acknowledging receipt of these documents.
- You need to be aware that the insurer must offer a two-day rescission right (i.e., free exit) that applies to the decision to enter into the contract and/or any fund selection.

## COMPENSATION DISCLOSURE STATEMENT

World Financial Group Insurance Agency of Canada Inc. (WFGIA), in performing our services on your behalf, may be eligible to receive compensation from one or more sources. Your agent can give you a complete explanation of the compensation he or she will receive if you buy insurance products, such as segregated funds.

## TERMS AND CONDITIONS

A withdrawal from one fund and a deposit to another will result in the funds being out of the market for at least one valuation day. Unit values fluctuate daily and there is a risk of being out the market during a unit value change.

- The withdrawal transaction could negatively affect the value of the contract's Death Benefit Guarantee.
- The withdrawal transactions could negatively affect the value of the contract's Maturity Guarantee.
- The withdrawal may result in a capital gain or a capital loss since it creates a taxable disposition (non-registered contracts only).
- You may be charged deferred sales charges for the withdrawal portion of this transaction.
- Movement between sales charge options must be within the same guarantee class.
- You have the right to change your mind within two business days of either the date you received confirmation **or** five business days after it is mailed. With written notification, we will refund the lesser of the value of your deposit or the market value of the day we receive your request. Fees and charges will be refunded.

## RESPONSIBILITY

You will not hold WFGIA liable for any loss or any failure to obtain any profit that is caused directly or indirectly by government restrictions; exchange or market rulings; suspension of trading; unavailability of any Electronic Service to allow for maintenance, updates or other reasonable cause; wars, strikes or other conditions beyond its control; or any errors or omissions in connection with or in the handling of orders relating to the purchase, sale, execution, or expiration of any trades or any related matter, unless WFGIA was grossly negligent. WFGIA will not act on any verbal instructions. To process a purchase, switch, sale or any other transaction, written instructions are required. WFGIA hereby guarantees repayment of any monetary loss that is incurred by the applicant as the result of a sale of segregated fund shares or units contemplated by this client application form, provided such loss is directly attributable to fraud, theft or negligence on the part of WFGIA or an employee thereof.

## BORROWING MONEY FOR INVESTMENT PURPOSES

Leveraging consists of borrowing money for investment purposes. This allows you to make a larger investment than if you only draw on your own savings. For the purposes of this information sheet, assume that leveraging involves borrowing at least \$15,000 for an investment and repaying the loan over several years. **Borrowing to invest can involve significant risk.**

Before you use leveraging:

1. Read the documentation received on the risks of this strategy.
2. Determine your tolerance for risk. Make sure you have fully understood and evaluated the risks of borrowing to invest and that this strategy fits into your risk profile.
3. Make sure that your investment horizon is long enough (5 years minimum).
4. Make sure you fully understand the tax impact of this strategy.
5. Borrow only what you can repay without having to sell your investment. Do not borrow more than you can repay.
6. Know exactly how much money you would lose in a worse-case scenario. For example, would you be able to handle a 30% decline in the value of your investments?

### You have a medium to high tolerance for risk

You should be comfortable with the risk of borrowing for investment purposes. This strategy is not appropriate for conservative investors, whose profiles call for investments with a low level of risk. This strategy is more suitable for investors with long-term investment horizons (5 to 10 years). It is not suitable for older investors or those approaching retirement who seek to maximize income and preserve capital.

### Your tax rate is fairly high

Borrowing money to purchase a segregated fund is particularly suitable for investors with fairly high tax rates because the interest payable on the loan may be tax deductible. However, borrowing is not necessarily a good strategy based solely on tax benefits. You should not consider just this criterion when deciding whether or not to use leveraging.

### You are in a healthy financial position

You should be able to repay the loan in addition to the interest stipulated in the loan agreement. Generally, a loan for the purchase of an investment should not exceed 30% of your net worth and 50% of your net liquid assets. For example, if your net liquid assets total \$200,000, you should not take out a loan for more than \$100,000.

### You have the required knowledge

You should be aware of the risks associated with borrowing for investment purposes. When you use leveraging, the value of the securities purchased could decline and be lower than the value of the loan. You may be required to incur losses according to the terms of the loan. Furthermore, if you rely on the return generated by the securities you have purchased to cover the payments on the loan you may become unable to repay the loan.

### Once you have taken out a loan:

Notify your representative if your financial position changes. For example, divorce, loss of employment or retirement are events that should prompt you to review the suitability of leveraging. Monitor interest rates because when they rise the cost of borrowing usually increases.

### The drawbacks of borrowing for investment purposes:

The return on your investments may be lower than the borrowing rate (after income tax is taken into consideration) and your investments may lose value and your financial institution may demand repayment of the loan. Remember:

- You will need to repay the loan in full
- You will need to pay all accumulated interest

## FILING A COMPLAINT

A **market conduct complaint** is any complaint that brings into question the actions of agents in regards to his/her conduct in connection with the sale, sales development or service of WFGIA-approved insurance products. It is an expression of dissatisfaction against the insurer or your agent with the identification of real or potential harm that you have experienced, or may experience, and your request for remedial action.

For more information on how to file a complaint, contact the Compliance Department of the insurance company that issued the contract or the Compliance Department at World Financial Group Insurance Agency of Canada Inc.

## PERSONAL INFORMATION

WFGIA is committed to protecting the privacy of all personal client information that is being collected, used and disclosed in the course of carrying out business with you. Upon receipt of this application, WFGIA will establish a file in which will be placed personal information about you concerning (a) this application; (b) any other form, application, authorization, trade ticket or other document you complete in relation to this application or to your investment account with us; and (c) other documents or information relating to the servicing and administration of this application or your investment account with us. We collect personal information about you from this application and any supplementary forms, as well as from our agents. We collect and use your personal information for the purposes of assessing and implementing your investment objectives and instructions, providing you with investment advice, servicing and administering this application and your investment account with us, and for such other purposes as are outlined in this application. Your information may be disclosed to your agent for the purposes identified above. Your Social Insurance Number will be used for income reporting purposes.

Your banking information will be disclosed to the financial institution(s) processing your investment deposits and withdrawals. You represent and warrant that you are authorized to provide the personal information of a referring third party as requested in this application.

From time to time WFGIA may use your personal information to determine what other financial or insurance products and services may meet your needs and offer them to you. Your consent for this use of your personal information is optional. If you do not wish your personal information to be used for this optional purpose, please make the appropriate selection on the front of this form.

Employees or authorized agents of WFGIA who will be responsible for functions relevant to the purposes identified above, and other persons authorized by you or by law, will have access to the personal information contained in your file. Subject to exceptions set out in applicable legislation, you may access your file and request corrections to your personal information by sending a written request to **World Financial Group Insurance Agency of Canada Inc. Attn: Privacy Officer, 5000 Yonge Street, Suite 800, Toronto, ON M2N 7E9.**

**By completing and signing this application, you acknowledge and agree that you have provided personal and financial information that is true and accurate, and you consent to the collection, use and disclosure of your personal information as described herein or at the time of collection, and as required or permitted by law.**

If you have any questions concerning the processing of your transaction, please direct inquiries to:

**World Financial Group Insurance Agency of Canada Inc., Operations Support | 5000 Yonge Street, Suite 800, Toronto, ON, M2N 7E9 Tel: 416-225-2121**

## PRE-AUTHORIZED DEBITS (PAD) AGREEMENT

1. By signing the WFGIA trade ticket, you hereby wave any pre-notification requirement as specified in section 17 of the Canadian Payments Association Rule H1 with regard to pre-authorized debits (PAD's).
2. You authorize the Fund Company/Companies indicated in this agreement to debit the bank account provided for the amount(s) and in the frequencies instructed. If additional space is required, a separate sheet may be attached.
3. If this is for your own personal investment, your debit will be considered a Personal Pre-Authorized Debit (PAD) by Canadian Payments Association (CPA) definition. If this is for business purposes, it will be considered a Business PAD. Monies transferred between CPA members will be considered a Funds TransferPAD.
4. If this is for a one-time or sporadic PAD request, only a single one-time PAD is permitted. Your authority is to remain in effect until the one-time PAD is completed, at which time this PAD agreement for the one-time/sporadic PAD request will automatically terminate.
5. You acknowledge that for a one-time or sporadic PAD, your PAD agreement is no longer valid once the payment has been fulfilled. Any subsequent one-time or sporadic PAD request requires you to authorize a new PAD agreement.
6. If this is for a set interval PAD request, your authority is to remain in effect until PAYEE NAME has received written notification from you of any change or termination. This notification must be received at the address provided below at least three (3) business days before the next debit is scheduled. A sample cancellation form and additional information may be available at your financial institution or by visiting [www.payments.ca](http://www.payments.ca). The PAYEE NAME may also cancel this PAD on no less than three (3) business days' notice.
7. You have certain recourse rights if a debit does not comply with this PAD agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD agreement. To obtain more information on your recourse rights, you may contact your financial institution or visit [www.payments.ca](http://www.payments.ca).
8. You confirm that all persons whose signatures are required to authorize transactions in the bank accounts provided have signed this agreement. You may change these instructions or cancel this PAD agreement at any time, provided that the relevant Fund Company receives at least three (3) business days notice by phone, fax, or by mail. Please consult each individual Fund Company to see if this may be reduced or waived. You can also obtain further information regarding the Fund Company's practices related to personal information, privacy, and information security. Contact information for the Fund Companies may be found at [http://www.fundserv.com/english/code/fund\\_active.shtml](http://www.fundserv.com/english/code/fund_active.shtml). To obtain a copy of a cancellation form or for more information regarding your right to cancel a PAD agreement, please consult with your financial institution or visit the Canadian Payments Association website at [www.payments.ca](http://www.payments.ca). You agree to release the financial institution of all liability if the revocation is not respected, except in the case of gross negligence by the financial institution. The Fund Company may cease issuing your PAD agreement in accordance with Rule H1.
9. The specified Fund Company is authorized to accept changes to this agreement from your registered dealer or your financial advisor in accordance with the policies of that company, in accordance with the disclosure and authorization requirements of the CPA.
10. You agree that the information in this form will be shared with the financial institution, insofar as the disclosure of this information is directly related to and necessary for the proper application of the rules applicable for pre-authorized debits.
11. You acknowledge and agree that you are fully liable for any charges incurred if the debits cannot be made due to insufficient funds or any other reason for which you may be held accountable.
12. If you are a resident of Quebec, you confirm that you have received a copy of this PAD agreement in French before an English copy.