

Submit the completed form to Manulife by mail or fax:

	English (Outside of Quebec)	French and Quebec
Mail	Manulife Investments 500 King St. N. Waterloo ON N2J 4C6	Manulife 2000 Mansfield St., Suite 1310 Montreal QC H3A 3A1
Fax	Segregated fund contracts 1-877-277-3774 Mutual fund accounts 1-866-581-8427	Segregated fund contracts 1-800-360-6492 Mutual fund accounts 1-866-581-8427
Questions? Contact Customer Service	Segregated fund contracts 1-888-790-4387 Mutual fund accounts 1-888-588-7999	Segregated fund contracts 1-800-355-6776 Mutual fund accounts 1-877-426-9991

- In this form, authorized individual(s) refers to trustees, power of attorneys, corporate resolution signing officers, and executors.
- This form aids in the protection of confidential information relating to contracts/accounts by collecting required information to enable authorized individual(s) to register for online access.
- Only the authorized individual(s) identified below will be given a verification code.
- For security reasons, Manulife cannot accept this form via email as the security of email communication cannot be guaranteed.
- All personal information provided will be kept according to our privacy policy. For further information regarding our privacy policy, go to manulife.ca.

Registered for Manulife online access and want to add an account

To add a contract/account to your existing access, complete and submit this form (see the instructions on the left side of the form). Allow 3-5 business days from when the form is received by Manulife for processing. Once processed, the contract/account will be accessible to you.

Not registered for Manulife online access – obtain your verification code

To register for Manulife online access, complete and submit this form to obtain a verification code (see the instructions on the left side of the form). Allow 3-5 business days from when the form is received by Manulife for processing to contact the Customer Service Centre to receive your verification code. Once you receive your verification code, input it during the online registration process.

We collect, use, and disclose the personal information provided for the purposes of processing your request, establishing, and managing our relationship with you, providing you with products and services, administering our business, and complying with legal and regulatory requirements.

We collect personal information from you, your advisor or authorized representatives, third parties you allow to share information with us or who issue, service, and administer your products and services now or in the future, and public sources.

We disclose your personal information to our employees, agents, representatives, and other parties with whom we deal in issuing and administering your products and services, now and in the future. Also, our employees or service providers who require this information to perform their services for us (for example data processing, programming, data storage, market research, printing and distribution services and investigative agencies).

Unless there are contractual limitations, your personal information may be accessed or transferred within or outside Canada and may be subject to the laws of those jurisdictions. You may withdraw your consent, subject to legal and contractual restrictions. You also have the right to access and correct your personal information maintained in our files. For more information, you can review our Canadian Privacy Policy at Manulife.ca or email us at Canada_Privacy@Manulife.ca.

Questions? See Customer Service contact details at the top of the page.

1 Account/contract details

Please provide the details of the account/contract to be accessed.

Product/Investment type:

Segregated fund contract

Mutual fund account

Contract number Contract holder

Account number Account holder

Contract number Contract holder

Account number Account holder

Contract number Contract holder

Account number Account holder

Contract number Contract holder

Account number Account holder

Advisor's name (can be found on your Manulife statement)

2 Authorized individual's information and second authorized individual's information (if applicable)

Please provide information about the authorized individual to be granted access.

Authorized individual's information

Name (first and last)

Date of birth (dd/mmm/yyyy)

Personal mailing address (unit/suite/apartment number)

City

Province

Postal code

Role Power of attorney Executor Trustee Signing officer

Second authorized individual's information (if applicable)

Name (first and last)

Date of birth (dd/mmm/yyyy)

Personal mailing address (unit/suite/apartment number)

City

Province

Postal code

Role Power of attorney Executor Trustee Signing officer

3 Authorized signatures and date

By signing below, you the authorized individual:

- confirm the information provided is complete and accurate; and
- consent to the collection and use of your personal information on this form for the purpose of confirming your identity and allowing you to register for online access.

Authorized individual's signature

Date signed (dd/mmm/yyyy)

Second authorized individual's signature (if applicable)

Date signed (dd/mmm/yyyy)

4 Nominee/intermediary authorization (to be completed by the nominee/intermediary)

FOR NOMINEE/INTERMEDIARY USE ONLY

Name of authorizing agent

By signing below, you are confirming the identity of the authorized individual, their authority to sign on behalf of the contracts/accounts listed above, and that you will notify us of any changes.

Signature

Date signed (dd/mmm/yyyy)