

Canadian ShareOwner Investments Inc. ("the Firm") Investment Club Member Information Form

ORDER EXECUTION ONLY ACCOUNT

Website: www.investments.shareowner.com

Account # (to be assigned by the Firm)

Account Owner/Annuitant Information

Mr. Mrs. Ms. Miss Dr. Social Insurance # _____ Date of Birth _____

 First Name(s) Middle Name Last Name Citizenship

 Residential Home Address (attach separate sheet of paper if mailing address is different) City Province Postal Code

 Home Phone Number Day-time Phone Number E-mail Address

 Occupation Employer Type of Business

Club Ownership Information – Please complete one of A or B below:

A. Percentage Ownership in Club B. Number of Club Units Owned Total Number of Units Issued

Other Information – If yes to any question, please provide details below.

Are you, your spouse, or a member of your immediate family, employed by the Investment Industry Regulatory Organization of Canada (IIROC), a stock exchange or a securities firm that is a member of IIROC? No Yes

Do you, your spouse, or a member of your immediate family, either by yourselves or as part of a group, own 10% or more of the voting rights of a publicly-traded company? No Yes

Are you, your spouse, or a member of your immediate family, a director or senior officer of a publicly-traded company? No Yes

Details: _____

Certification

I certify that the information provided in this application is true and complete and declare that the Firm may rely upon such information until it receives written notice of any changes.

Club Member Signature _____ Date (mm/dd/yy) _____
 I.D. photocopy enclosed

No Advice or Recommendations

I acknowledge that the Firm will not provide me with any legal, tax or accounting advice, investment advice or recommendations regarding the suitability or profitability of any security, transaction or investment. I further acknowledge that the Firm's employees are not authorized to give any such advice and agree that I will not solicit or rely upon any such advice from the Firm or any of its employees. I assume full responsibility for my investment decisions and all transactions in my account and agree that the Firm and its officers, directors, employees, agents and affiliates will have no liability for any such investment decisions or transactions. I acknowledge that the Firm will not consider my financial situation, investment knowledge, investment objectives or risk tolerance when accepting orders.

Club Member Signature _____ Date (mm/dd/yy) _____

FOR INTERNAL USE ONLY

Is this a Pro Account? Yes No Is IR/RR registered in the Province or Country in which the client resides? Yes No
 U.S. Withholding Rate 0% 15% 30% United Nations Suppression of Terrorism check completed? Yes No

Club Member Bank Name: _____ Institution# _____ Transit# _____ | Account# _____

R.R. Signature _____ Date _____ Compliance Department Signature _____ Date _____