



RBC Direct Investing Inc.

FAMILY REGISTERED EDUCATION SAVINGS PLAN

Request to Add a Beneficiary

TO: RBC Direct Investing Inc.

I hereby request RBC Direct Investing® to add the following beneficiary/beneficiaries to my existing Family Registered Education Savings Plan

Account:

A. ACCOUNT INFORMATION

Account		
Subscriber's Surname	Subscriber's Given Name	Initials

B. BENEFICIARY INFORMATION

The RBC Direct Investing Education Savings Plan is a Family Plan. Family Plans may have more than one beneficiary but all must be related to the subscriber(s) by blood or adoption as defined in the Income Tax Act (Canada) and must not have attained 21 years of age. Your children, grandchildren, brothers and sisters are related to you by blood. Your nieces and nephews are not related to you by blood. You cannot designate yourself or your spouse as a beneficiary under a Family Plan.

IT IS ESSENTIAL THAT THE BENEFICIARY'S NAME AND SOCIAL INSURANCE NUMBER RECORDED BELOW ARE EXACTLY AS THEY APPEAR ON THE BENEFICIARY'S SOCIAL INSURANCE CARD. ALL OTHER INFORMATION REQUESTED BELOW MUST BE COMPLETE AND ACCURATE. ERRORS OR OMISSIONS RELATING TO BENEFICIARY INFORMATION WILL PREVENT HUMAN RESOURCES AND SKILLS DEVELOPMENT CANADA (HRSDC) FROM PAYING ANY GRANT MONEY.

Additional Beneficiary (Name must be exactly as appears on Social Insurance Card)

Surname		Given Name			Initials	
Date of Birth	Month	Day	Year	Social Insurance Number	Gender	Canadian Resident
					Female <input type="checkbox"/> Male <input type="checkbox"/> Another Gender <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Subscriber(s) Relationship to Beneficiary: Parent <input type="checkbox"/> Grandparent <input type="checkbox"/> Sibling <input type="checkbox"/> Legal Guardian <input type="checkbox"/>						
Custodial Parent/Guardian Name & Address (if not Subscriber)						

Additional Beneficiary (Name must be exactly as appears on Social Insurance Card)

Surname		Given Name			Initials	
Date of Birth	Month	Day	Year	Social Insurance Number	Gender	Canadian Resident
					Female <input type="checkbox"/> Male <input type="checkbox"/> Another Gender <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
Subscriber(s) Relationship to Beneficiary: Parent <input type="checkbox"/> Grandparent <input type="checkbox"/> Sibling <input type="checkbox"/> Legal Guardian <input type="checkbox"/>						
Custodial Parent/Guardian Name & Address (if not Subscriber)						

C. COMPLETE AND ATTACH A SEPARATE CANADA EDUCATION SAVINGS GRANT APPLICATION – FORM SDE 0093

16/17 Year Old Requirements

To be eligible to receive a CESG, where the beneficiary was 16 or 17 years of age this year, at least one of the following conditions must have been met in order to receive the Grant. Check the conditions that apply (you may have to contact the custodial parent for this information).

1. A minimum of \$2,000 of contributions has been made, and not withdrawn, to registered education savings plans (RESPs) in respect of the beneficiary before the year in which the beneficiary was 16 years of age. Beneficiary 1 2
2. A minimum of \$100 of annual contributions has been made, and not withdrawn, to RESPs in respect of the beneficiary in any four years before the year in which the beneficiary turned 16 years of age. Beneficiary 1 2

Residency Declaration

I confirm that the beneficiary(ies) is/are residents of Canada, unless otherwise noted in Section B above. I understand residency is a requirement for receiving a grant under the Canada Education Savings Grant Program. I undertake to advise RBC Direct Investing if the beneficiary is no longer resident in Canada at the time I make a contribution for that beneficiary. I further undertake to advise RBC Direct Investing if the beneficiary is a non-resident at the time an educational assistance payment is requested.

I/WE HEREBY DECLARE THAT THE INFORMATION GIVEN IN THIS DOCUMENT IS TRUE, CORRECT AND COMPLETE IN EVERY RESPECT.

Dated at: _____ This _____ Day of: _____

X

Subscriber Signature

X

Joint Subscriber Signature

The information contained in this form, as well as the amount of the contribution and grant paid to the plan may be shared with the custodial parent/guardian. Information will also be provided to HUMAN RESOURCES AND SKILLS DEVELOPMENT CANADA, the federal government department responsible for the CESG program and Canada Revenue Agency for taxation purposes.