THE KING'S UNIVERSITY COLLEGE

PLAN NUMBER

The King's Group Retirement Savings Plan

9125 50th Street Edmonton AB T6B 2H3
(780) 465-8307 rrsp@kingsu.ca

Application Form

ANNUITANT INFORMATION

LAST NAME

FIRST NAME

ADDRESS LINE 1

ADDRESS LINE 2

CITY

PROVINCE

POSTAL CODE

SOCIAL INSURANCE NUMBER

BIRTHDATE

PHONE NUMBER

SPOUSAL CONTRIBUTION INFORMATION

Complete only if this deposit is being made by and claimed as a deduction by your spouse.

CONTRIBUTING SPOUSE LAST NAME

CONTRIBUTING SPOUSE FIRST NAME

CONTRIBUTING SPOUSE SOCIAL INSURANCE NUMBER

PLEASE REVIEW CAREFULLY AND SIGN BELOW

To: Concentra Trust – Trustee

I hereby apply for participation in ***The King's Group Retirement Savings Plan*** in accordance with the terms and conditions set forth in the ***Declaration of Trust*** provided to me.

I request
- That the Trustee apply to register my plan as a Retirement Savings Plan with the Canada Revenue Agency pursuant to the provisions of the ***Income Tax Act (Canada)***.
- That this contribution and any subsequent contributions be deposited to the ***The King's Group Retirement Savings Plan*** by the Trustee.

I acknowledge
- That I agree with and will agree with the terms and conditions of all contributions to ***The King's Group Retirement Savings Plan***.
- That my contributions will be held in trust by the Trustee.
- That my contributions will be invested principally in mortgages of ***The King's University College*** property at prevailing interest rates.
- That I am solely responsible for determining the amount of contribution to the Plan, and my contributions may be claimed as a deduction under applicable tax legislation.
- That any payments received by me under the Plan must be included in my income for the taxation year of receipt and will be subject to tax under applicable tax legislation.

I hereby authorize the following employer to act as the agent for the purpose of deducting contributions by payroll deductions.

THE EMPLOYER

I confirm that the information provided to Concentra Financial Services Association, its agents or affiliates (collectively "Concentra Financial") is complete and accurate. I hereby agree and consent to, and accept this as notice of, their terms of the Concentra Financial Confidentiality and Privacy Statement (located at http://www.concentrafinancial.ca/confidential_privacy.asp). I further agree and consent to Concentra Financial obtaining and retaining my personal information in order to ascertain my identity as required by the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act* and as required by law.

ANNUITANT SIGNATURE

DATE

ACCEPTED BY THE KING'S UNIVERSITY COLLEGE, AUTHORIZED AGENT FOR THE TRUSTEE

November 2008