

DECLARATION OF DEPENDENT CHILDREN AGED 18 TO 25 OR 21 TO 25 INCLUSIVE (ACCORDING TO CONTRACT PROVISIONS) WHO ARE FULL-TIME STUDENTS

Declaration for the		session, starting in		
Definition of dependent child for the	purposes of the Insura	ance Plan:		
Dependent child" means an eligible	person who is a resid	dent of Canada and who		
is under 18 or 21 years of age (a authority until he reached the ag		rovisions) and over whom	the member or the member's s	pouse exercises parental
does not have a spouse, is 25 y member or the member's spouse				ution and over whom the
ast Name	First Name	Date of Birth	Name of Educational Institution Attended	Full-time Student
		YYYY MM DD		Yes No
				To YYYY MM DD
		YYYY MM DD		☐ Yes ☐ No
				From
		YYYY MM DD		☐ Yes ☐ No YYYY MM DD
				To
Member's last name and first name Policy or group or contract no.: Certificate no.: Name of group or policyholder or expenses.				
Membe	r's signature		Di	ate
Plea	С	esjardins Financial Sec .P. 3950 évis (Québec) G6V 8C6	urity Life Assurance Company	1

This form must be returned to Desjardins Financial Security Life Assurance Company in the month preceding the beginning of each session.