MRS Investment Account Application

Use this application for the following investment accounts:

- ☑ Individual
- ☑ Joint
- ☑ Tenants In Common
- ☑ In Trust For (informal trust)
- ☑ Estate
- ☑ Corporate
- ☑ Unincorporated Organization
- ☑ Formal Trust

including Group accounts

MRS INVESTMENT ACCOUNT APPLICATION

FOR INTERNAL USE

MAP504 2/06

1. Account Type - Check one only

a) ❑ Individual
b) ❑ Joint Rights of Survivorship* (JTWROS; not available in Quebec)
c) ❑ Tenants in Common* (TIC)
d) ❑ In Trust For* (ITF – Informal trust; includes ITF accounts with co-applicants)
❑ Estate: submit in Executor's name "as executor for the estate of..."

If any of a) - d) is checked, and it is also a Group account, check here ❑

*** Note:** *Attach a separate sheet for more than 2 applicants or ITF beneficiaries. Joint accounts are limited to 4 applicants. ITF accounts are limited to a combined total of 4 applicants and ITF beneficiaries.*

The following require additional MRS documents before trading may commence.

❑ Corporation
- Corporate Resolution (MRS Form #107); AND
- Personal Guarantee of Corporate Account (MRS Form #108)

❑ Unincorporated Organization (ex. Association, Charity, Condo Board, Partnership, etc.)
- Authorization for Unincorporated Organizations (MRS Form #109)

❑ Formal Trust
- Trust agreement (prepared by client's legal advisor(s))
- (Optional) Attach a separate sheet with trustees' and beneficiaries' addresses if different from Section 2

2. Applicant Information

BUSINESS NUMBER (for tax reporting) | SOCIAL INSURANCE NUMBER | DATE OF BIRTH Y Y Y Y M M D D

1-Mr. 2-Mrs. 3-Miss. 4-Ms. 5-Dr. 6-Prof.

LAST NAME OR COMPANY/ ORGANIZATION NAME | FIRST NAME | INITIALS

ADDRESS | APT. | CITY | PROVINCE | POSTAL CODE

( ) – RESIDENCE TELEPHONE NUMBER | ( ) – BUSINESS TELEPHONE NUMBER | COUNTRY* | CITIZENSHIP

MAILING ADDRESS IF DIFFERENT FROM ABOVE | APT. | CITY | PROVINCE | POSTAL CODE

OF DEPENDANTS | E-MAIL ADDRESS

Language Preference ❑ English ❑ French

* Any person who resides outside Canada is required to provide proof of citizenship

3. Co-Applicant Information - ❑ Check box if separate sheet attached with additional applicants

SOCIAL INSURANCE NUMBER | DATE OF BIRTH Y Y Y Y M M D D

1-Mr. 2-Mrs. 3-Miss. 4-Ms. 5-Dr. 6-Prof.

LAST NAME | FIRST NAME | INITIALS

❑ Address same as Applicant's OR

ADDRESS | APT. | CITY | PROVINCE | POSTAL CODE

( ) – RESIDENCE TELEPHONE NUMBER | ( ) – BUSINESS TELEPHONE NUMBER | COUNTRY* | CITIZENSHIP

* Any person who resides outside Canada is required to provide proof of citizenship

4. In Trust For Information - names below will be included in one account

- (Optional) Attach a separate sheet with addresses of ITF individuals (ie. beneficiaries), if different from applicant's address

LAST NAME | FIRST NAME | DATE OF BIRTH Y Y Y Y M M D D

LAST NAME | FIRST NAME | DATE OF BIRTH Y Y Y Y M M D D

❑ Check box if separate sheet attached with additional ITF individuals

5. Dealer and Financial Advisor Name

DEALER NAME (PLEASE PRINT) | DEALER # | FINANCIAL ADVISOR NAME (PLEASE PRINT) | FINANCIAL ADVISOR #

6. Annual Account Fees - The method chosen below (excluding *Invoice my employer*) will apply to all of your annual fee accounts with M.R.S. Inc. (MRS) and replaces any previously chosen method.

I request that my annual account fees, until I direct otherwise in writing, be collected from (select one):

A ❑ **My chequing account**
Void cheque required. This bank account will be used for all annual account fees. Unpaid fees will be collected from your MRS account(s).

B ❑ **My individual (not joint or ITF) MRS investment account**
If an individual investment account does not exist, option C will apply.

C ❑ **My MRS registered account(s), up to the fee applicable per account, then from my MRS investment account(s), if any.**

D ❑ **Invoice my employer** (Available for Group accounts only.)
Unpaid fees will be collected from your MRS account(s).

7. Banking Reference - for investment accounts with co-applicants, if the bank account is not in all the applicant's names, banking information is required for each applicant (please submit on a separate sheet)

0 BANK # | TRANSIT # | ACCOUNT # | NAME OF FINANCIAL INSTITUTION

ADDRESS | CITY | PROVINCE | POSTAL CODE

ORIGINAL - MRS YELLOW COPY - DEALER/FINANCIAL ADVISOR GREEN COPY - APPLICANT

8. Shareholder Communication Information

I have read and understand the terms under the section "National Instrument 54-101 Explanation To Clients" disclosed on the reverse of this application. I agree that the choices indicated by me apply to all of the securities held in the account.

Part 1 - Receiving Securityholder Materials

Please mark the corresponding box to show what materials you want to receive. Securityholder materials sent to beneficial owners of securities consist of the following materials: (a) proxy-related materials for annual and special meetings; (b) annual reports and financial statements that are not part of proxy-related materials; and (c) materials sent to securityholders that are not required by corporate or securities law to be sent.

- ❑ **I WANT** to receive **ALL** securityholder materials sent to beneficial owners of securities.
- ❑ **I DECLINE** to receive **ALL** securityholder materials sent to beneficial owners of securities. (Even if I decline to receive these types of materials, I understand that reporting issuer or other person or company is entitled to send these materials to me at its expense).
- ❑ **I WANT** to receive **ONLY** proxy-related materials that are sent in connection with a special meeting.

(Important note: These instructions do not apply to any specific request you give or may have given to a reporting issuer concerning the sending of interim financial statements of the reporting issuer. In addition, in some circumstances, the instructions you give in this client response form will not apply to annual reports or financial statements of an investment fund that are not part of proxy-related materials. An investment fund is also entitled to obtain specific instructions from you on whether you wish to receive its annual report or financial statements, and where you provide specific instructions, the instructions in this form with respect to financial statements will not apply.)

Part 2 - Disclosure of Beneficial Ownership Information

Please mark the corresponding box to show whether you DO NOT OBJECT or OBJECT to us disclosing your name, address and securities holdings to issuers of securities you hold with us and to other persons or companies in accordance with securities law.

- ❑ **I DO NOT OBJECT** to you disclosing the information described above.
- ❑ **I OBJECT** to you disclosing the information described above.

9. Account Agreement - Please ensure all applicants sign this section.

PLEASE READ THE ACCOUNT AGREEMENT ON THE REVERSE SIDE OF THE APPLICATION FOR IMPORTANT CONDITIONS THAT APPLY TO YOUR ACCOUNT.

I/we acknowledge that I/we have read and agree to be bound by the Account Agreement terms and conditions noted on the reverse.

Privacy Protection

By signing this application form below, I acknowledge reading the MRS Group of Companies Privacy Protection Notice contained in this application and I consent to my personal information being collected, held, used and disclosed (i) by each MRS company with whom I have an account in the ways and for the purposes identified in the MRS Group of Companies Privacy Protection Notice and (ii) by the Introducing Dealer as necessary for the purpose of carrying out the functions described in clause (b) of the Account Agreement contained in this application. If I have provided information concerning any other person, I confirm that I am authorized to provide such information.

X ______________ SIGNATURE OF APPLICANT

X ______________ SIGNATURE OF CO-APPLICANT

Y Y Y Y M M D D DATE

X ______________ SIGNATURE OF CO-APPLICANT

X ______________ SIGNATURE OF CO-APPLICANT

Y Y Y Y M M D D DATE

Sections 10 to 15 are optional

10. Identity Verification (Federal Legislation*) - Attach photocopies of ID:

NAME | ID CODE | ID REFERENCE #

NAME | ID CODE | ID REFERENCE #

Select ID Code = 1 = Driver's License, 2 = Passport, 3 = Birth Certificate (only if under age 21)

* Notes:

1. To comply with federal legislation (Proceeds of Crime (Money Laundering Act)) and CRA regulations, banking information must be obtained from all individuals authorized to give instructions on the account and the identity of all individuals with an interest in the account must be verified.
2. Please complete the identity verification for each person with authority over or any financial interest in the account.
3. For additional account holders/authorized individuals/interested person, attach a separate sheet to record the above information for the remaining parties.

11. Spousal Information

Applicant's Spouse (Complete if spouse is not a co-applicant)

1-Mr 2-Mrs 3-Miss 4-Ms 5-Dr. 6-Prof. LAST NAME | FIRST NAME

Y Y Y Y M M D D DATE OF BIRTH | SOCIAL INSURANCE NUMBER

EMPLOYER'S NAME

EMPLOYER'S ADDRESS

TYPE OF BUSINESS | POSITION | YEARS WITH EMPLOYER

Are you designated as a Pro (licensed to sell securities)? ❑ NO ❑ YES

Are you a senior officer or director of a company whose shares are traded on an exchange or in the over-the-counter market? ❑ NO ❑ YES

If yes, COMPANY NAME

Do you, as an individual or as part of a group, hold or control that company? ❑ NO ❑ YES

Co-Applicant's Spouse (Complete if co-applicant is not applicant's spouse.)

❑ **Check box if separate sheet attached with information on additional co-applicants.**

1-Mr 2-Mrs 3-Miss 4-Ms 5-Dr. 6-Prof. LAST NAME | FIRST NAME

Y Y Y Y M M D D DATE OF BIRTH | SOCIAL INSURANCE NUMBER

EMPLOYER'S NAME

EMPLOYER'S ADDRESS

TYPE OF BUSINESS | POSITION | YEARS WITH EMPLOYER

Are you designated as a Pro (licensed to sell securities)? ❑ NO ❑ YES

Are you a senior officer or director of a company whose shares are traded on an exchange or in the over-the-counter market? ❑ NO ❑ YES

If yes, COMPANY NAME

Do you, as an individual or as part of a group, hold or control that company? ❑ NO ❑ YES

12. Employer Information

APPLICANT'S INFORMATION

EMPLOYER'S NAME

EMPLOYER'S ADDRESS

TYPE OF BUSINESS | POSITION | YEARS WITH EMPLOYER

Are you designated as a Pro (licensed to sell securities)? ❑ NO ❑ YES

Are you a senior officer or director of a company whose shares are traded on an exchange or in the over-the-counter market? ❑ NO ❑ YES

If yes, ____________________
COMPANY NAME

Do you, as an individual or as part of a group, hold or control that company? ❑ NO ❑ YES

CO-APPLICANT'S INFORMATION

❑ Check box if separate sheet attached with information on additional applicants.

EMPLOYER'S NAME

EMPLOYER'S ADDRESS

TYPE OF BUSINESS | POSITION | YEARS WITH EMPLOYER

Are you designated as a Pro (licensed to sell securities)? ❑ NO ❑ YES

Are you a senior officer or director of a company whose shares are traded on an exchange or in the over-the-counter market? ❑ NO ❑ YES

If yes, ____________________
COMPANY NAME

Do you, as an individual or as part of a group, hold or control that company? ❑ NO ❑ YES

13. Financial Information and Investment Experience

Include information on you, your co-applicant(s) and your spouse(s). For non-personal accounts, include information on the company or organization.

a) **Gross annual income from all sources:**
❑ $0-$24,999 ❑ $25,000-$49,999 ❑ $50,000-$99,999
❑ $100,000-$149,999 ❑ $150,000+

b) **Estimated net liquid assets: (bank accounts, T-Bills, and other assets that can be readily converted to cash without risk of loss or penalty.)**
❑ $0-$24,999 ❑ $25,000-$49,999 ❑ $50,000-$99,999
❑ $100,000-$149,999 ❑ $150,000+

c) **Estimated net fixed assets: (the value of all your fixed assets including real estate, securities, less all of your debts including mortgages.)**
❑ $0-$24,999 ❑ $25,000-$74,999 ❑ $75,000-$149,999
❑ $150,000-$299,999 ❑ $300,000+

d) **Estimated net worth: (d = b + c)**
❑ $0-$24,999 ❑ $25,000-$74,999 ❑ $75,000-$149,999
❑ $150,000-$299,999 ❑ $300,000+

e) **Do you have any accounts with other brokerage firms?** ❑ NO ❑ YES

Account type(s): ____________________ ____________________

f) **Investment knowledge:** None ❑ Low ❑ Moderate ❑ High ❑ Extensive ❑

g) **Past investment experience: (Check one box for each of 1-10)**

		None	Low	Moderate	High	Extensive
1.	Common Shares	❑	❑	❑	❑	❑
2.	Preferred Shares	❑	❑	❑	❑	❑
3.	Bonds	❑	❑	❑	❑	❑
4.	Money Market	❑	❑	❑	❑	❑
5.	New Issues	❑	❑	❑	❑	❑
6.	Mutual Funds	❑	❑	❑	❑	❑
7.	Options	❑	❑	❑	❑	❑
8.	Commodities/Futures	❑	❑	❑	❑	❑
9.	Real Estate	❑	❑	❑	❑	❑
10.	Short Sales	❑	❑	❑	❑	❑

14. Account Information

a) Does anyone other than you, the Applicant(s), have any financial interest in this account? (If yes, attach a completed supplementary Trading Authorization which must include the signature of and banking information – as in Sections 7 & 10 – on the authorized individual) ❑ NO ❑ YES

b) Do you, the Applicant(s), wish to appoint another person(s) to have full power and authority over your account? (If yes, attach a completed Power of Attorney, which must include the signature of and banking information – as in Sections 7 & 10 – on the authorized individual) ❑ NO ❑ YES

c) Do you, the Applicant(s), control the trading in any other MRS accounts? (If yes, indicate account numbers below): ❑ NO ❑ YES

ACCOUNT # ACCOUNT #

d) **Risk tolerance:**
None ❑ Low ❑ Moderate ❑ High ❑ Extensive ❑

e) **List investment objectives:**

_______ % Liquidity
_______ % Safety
_______ % Income
_______ % Long-term Growth
_______ % Short-term Trading
_______ % Speculative
_______ % Inflation Hedging
= 100 %

15. Dealer/Financial Advisor Information

a) Do you have a direct or indirect interest in the Account other than an interest in commissions charged? (If yes, give details in Financial Advisor's Comments) ❑ NO ❑ YES

b) Are you registered in the province in which the client resides? ❑ NO ❑ YES

c) Have you personally met the client? ❑ NO ❑ YES

If yes, when? ____________________

d) How long have you known the client? ____________________

e) How did you come to know the client?

❑ Advertising Lead ❑ Phone-In ❑ Personal Contact ❑ Walk In ❑ Referral

Referral by: ____________________

f) Has a credit check been done? ❑ NO ❑ YES Y Y Y Y M M D D

If Yes, what was the result (check one) ❑ Acceptable ❑ Not Acceptable

Financial Advisor's Comments ____________________

X ____________________ Y Y Y Y M M D D
SIGNATURE FINANCIAL ADVISOR DATE

X ____________________ Y Y Y Y M M D D
BRANCH MANAGER'S APPROVAL DATE

X ____________________ Y Y Y Y M M D D
PARTNER'S OR DIRECTOR'S ACCEPTANCE DATE

Initial order:

❑ Buy **or** ❑ Sell ❑ Solicited **or** ❑ Unsolicited

Amount $ ____________ Description________________________

ACCOUNT AGREEMENT

Throughout this Agreement, the terms "I", "me", "my", "we", "us", and "our" mean the MRS Investment Account holder(s). In consideration of MRS accepting this account, I acknowledge and agree that:

a) I have engaged my dealer/financial advisor as my agent.

b) The Introducing Dealer (your Dealer) and M.R.S. Inc. have entered into an Introducing/Carrying Dealer Arrangement. M.R.S. Inc., as the Carrying Dealer, will be responsible for trade execution (where M.R.S. Inc. enters the trade), trade settlement, custody of cash and securities, and the issuance of confirmations and statements. All client cheques are required to be made payable to M.R.S. Inc. M.R.S. Inc. is also responsible for and maintains in its name trust accounts established in respect of cash received except in circumstances where your Dealer is permitted by securities regulation to operate a trust account. Your Dealer will be responsible for determining suitability and ensuring appropriate supervision is performed for all trading activity in your account. Under this arrangement M.R.S. Inc. may pay a portion of its fees to your Dealer and your Dealer my pay a portion of its fees to M.R.S. Inc.

c) MRS has the right to reject any of my instructions, or to sell any securities in my account, for legal, regulatory or eligibility reasons.

d) I acknowledge that MRS is under no duty to evaluate the appropriateness, accuracy or quality of any instructions received from me, my financial advisor/dealer, or my employer for group accounts.

e) My fixed income trades are valid until the end of the day, unless otherwise specified. I acknowledge that I am responsible for all trades, placed by me or my Dealer or my Financial Advisor and I must pay for the trade at the time the trade is placed.

f) I am responsible for all commissions payable in respect of all trades.

g) MRS will provide me with the applicable Account Fee Schedule upon their opening of my account. I will have up to 30 days from the date of account opening by MRS to close my account without being charged the applicable fees as outlined in the Account Fee Schedule. For its annual fee, MRS provides various account administration services, including custody of securities, maintenance of accounting records, collecting and remitting income and issuing statements. The services provided by MRS do not extend to investment advice or investment recommendations.

h) I will pay MRS all amounts owing to MRS and any fees as outlined in the Account Fee Schedule. In addition, MRS can sell securities in this account or otherwise deduct from this account all amounts owing to MRS in respect of this account or any other of my accounts at the MRS Group of Companies.

i) I will deliver any securities that I sell to MRS promptly if not held by MRS. If I do not, MRS may purchase the security at my expense.

j) In the absence of investment instructions, MRS will invest cash in an interest bearing cash account as part of the guaranteed deposits of M.R.S. Trust Company. M.R.S. Trust Company will also pay interest to this account on credit balances, or charge interest to this account on debit balances, at the applicable rate as posted from time to time.

k) I will notify MRS in writing about any errors or omissions within the time limits specified on confirmations, statements or other notices.

l) For all accounts, including corporate, unincorporated organization, formal trust and estate accounts, I will provide any additional documentation as reasonably requested by MRS.

m) If I participate in the STAR or KEYSTONE Asset Allocation Programs, I authorize the manager to sell or purchase fund units as necessary to rebalance the portfolios in accordance with the programs and as described in the current prospectus for the STAR or the KEYSTONE funds.

n) MRS has the right to conduct a credit check on me and my business, if applicable. MRS also has the right to use banking information to verify my identity.

o) I will advise MRS of any changes to this account in writing.

p) I acknowledge that M.R.S. Trust Company may have a security interest in this account, and any securities or property held in it, in relation to an M.R.S. Trust Company loan. MRS is authorized to accept instructions from M.R.S. Trust Company in connection with the operation of this account and the realization of any security interest.

q) MRS may, from time to time, amend the terms of this Account Agreement, including introducing a new fee or increasing the fees outlined in the Account Fee Schedule, after giving me no less than 60 days notice of the new or increased fee.

r) All transactions in this account are subject to the rules and regulations of the securities industry, as applicable, and the laws of the Province of Ontario.

s) In the MRS Investment Account Application and Account Agreement all singular references are deemed to be in the plural, as applicable.

The following additional terms apply only to accounts held jointly or as tenants in common:

t) The account is owned jointly by those persons signing the MRS Investment Account Application and that ownership is in equal portions, unless otherwise specified if held as tenants in common.

u) All of us are jointly and severally liable to MRS for any debts, liabilities and obligations arising in connection with the account.

v) MRS may, without consulting any of the other account holder(s), act on orders for the account submitted by any one of us, including authorization to receive confirmations, statements or other information and to buy, sell, deposit, withdraw, transfer, deliver and/or receive any and all account eligible securities and/or funds.

w) The transfer, delivery or payment of securities and/or funds may be made to any one of us or an account for any one of us, without any liability to MRS.

x) All confirmations, statements, or other notices from MRS will be mailed to the Applicant's address or to the mailing address if one is provided. All such correspondence will then be considered to have been mailed to all of the account holders.

y) On the death of any one of us, the deceased's portion of the account proceeds will be disposed of to the remaining account holder(s) if the account is held with rights of survivorship, or to the executor or administrator of the deceased's estate if it is held as tenants in common.

z) On the death of any one of us, the remaining account holder(s) agrees to immediately advise MRS, and to provide such documentation as may reasonably be requested. MRS reserves the right to restrict the account, as deemed necessary for tax, liability, or legal reasons, under any present or future law.

aa) The deceased's estate and the surviving account holder(s) continue to be jointly and severally liable for debts, liabilities and obligations resulting from transactions initiated prior to MRS receiving written notice of death, or incurred in liquidating the account or adjusting the interests of the surviving account holder(s).

The following additional terms apply only to informal In Trust For accounts:

bb) If this account is held In Trust For more than one individual (ie., beneficiary), each beneficiary's interest in the account is deemed to be in equal portions.

cc) MRS has no obligation to observe the terms of any trust and I am solely responsible for ensuring compliance with the terms of any applicable trust agreement, or applicable law.

dd) For accounts with co-applicants, all confirmations, statements, or other notices from MRS will be mailed to the Applicant's address or to the mailing address if one is provided. All such correspondence will then be considered to have been mailed to all of the account holders.

ee) For accounts with co-applicants, on the death of any one of us, the remaining account holder(s) agrees to immediately advise MRS, and to provide such documentation as may reasonably be requested. MRS reserves the right to restrict the account, as deemed necessary for tax, liability, or legal reasons, under any present or future law.

PRIVACY PROTECTION NOTICE

The MRS Group of Companies has always been committed to protecting the privacy of all client personal information that we collect and maintain in the course of carrying on our business. We are pleased to provide you with our Privacy Protection Notice which describes how we collect, hold, use and, when needed, disclose your personal information when we do business with you and your financial advisor. This notice adheres to the Personal Information Protection and Electronic Documents Act (Canada) and similar provincial privacy legislation. Please read this notice and contact us through one of the means listed at the end of the document if you have any questions.

1. **Client Record and Personal Information:** The personal information collected about you for the purposes identified in this Privacy Protection Notice is held in a record called the "client record". The personal information in your client record may include your name, address and telephone number, social insurance number, birth date, account holdings, personal loan balances, and the name, address and social insurance number of your spouse, beneficiary, and co-borrower. Depending on the investment, personal loan product, or service you request, additional personal information may be held in your client record. For example, if you have a personal loan from M.R.S. Trust Company, information regarding your financial situation and credit reports is also held in your client record.

2. **Providing Your Information to the MRS Group of Companies:** When you complete an application form or otherwise open an account with M.R.S. Trust Company, M.R.S. Inc., M.R.S. Securities Services Inc. (member CIPF), M.R.S. Correspondent Corporation and any affiliate or successor company of each of them whose business relates to a purpose identified in this Privacy Protection Notice (individually, a "MRS company", or collectively, the "MRS Group of Companies"), you are providing personal information to that MRS company including, where applicable, personal information concerning your spouse, beneficiary, and co-borrower, in order to:
   (a) make an investment;
   (b) apply for a personal loan product;
   (c) provide instructions to a MRS company about an investment you have already made or an outstanding personal loan product you already have; or
   (d) receive information related to an investment you have made or a pre-approved personal loan product.

   Each MRS company with whom you have an account collects this personal information, holds it in your client record, uses it, and, when needed, discloses it for the purposes identified in this Privacy Protection Notice.

3. **Collecting, Holding, Using, and Disclosing Personal Information in Your Client Record:** Each MRS company with whom you have an account may collect, hold, and use the personal information in your client record as well as collect personal information from and disclose personal information to the third parties identified below for the following purposes:
   (a) identifying you and ensuring the accuracy of information contained in your client record;
   (b) establishing and administering your account, determining, maintaining, recording, and storing account holdings, loan balances, and transaction information in your client record;
   (c) executing transactions with or through a MRS company including transferring funds by electronic or other means;
   (d) providing you and your financial advisor/dealer with investment and loan account statements, transaction confirmations, tax receipts, financial statements for the investments that you have made, proxy mailings, registered plan notices, and other information which you or your financial advisor/dealer may request as needed to service your account;
   (e) assisting your financial advisor/dealer in determining the suitability of your investments;
   (f) assessing your financial situation and conducting credit investigations to determine your eligibility or continued eligibility for personal loan products;

(g) informing you of MRS products and services;
(h) furthering our own business interests including collecting a debt owed to a MRS company, executing transactions related to the securitization of your debt, which a MRS company considers to be in our own business interests, and engaging in the financing or sale of all or part of our businesses;
(i) meeting legal and regulatory requirements; and
(j) verifying information previously given by you with any other organization when necessary for the purposes provided in this Privacy Protection Notice.

4. **Third Parties:**
(a) Each MRS company with whom you have an account may collect your personal information for the purposes identified in this Privacy Protection Notice from third parties such as your financial advisor/dealer, credit bureaux, your employer or others providing a personal reference, other companies in the MRS Group of Companies (defined above), other financial institutions and mutual fund companies, and from third parties who represent that they have the right to disclose the information.
(b) Each MRS company with whom you have an account may transfer your personal information for the purposes identified in this Privacy Protection Notice to our service providers, such as account statement preparation and mailing companies, courier companies, imaging companies, document storage companies, and personal loan and deposit product record-keeping companies. When a MRS company transfers personal information to our service providers, we ensure by contractual means that the transferred personal information is used only for the purposes for which the service provider is retained.
(c) Each MRS company with whom you have an account may disclose your personal information to third parties where required by law, such as disclosure for tax purposes to the Canada Revenue Agency, and to self-regulatory organizations including Market Regulation Services Inc., the Investment Dealers Association of Canada, the Mutual Fund Dealers Association of Canada, Bourse de Montreal Inc., and the Canadian Investor Protection Fund.
(d) Each MRS company with whom you have an account may disclose your personal information for the purposes identified in this Privacy Protection Notice to third parties such as your financial advisor/dealer, credit bureaux, other companies in the MRS Group of Companies, and other financial institutions and mutual fund companies. If you wish to withdraw consent to the continuation of this type of information sharing or discuss the implications of such withdrawal, please contact us through one of the means listed at the end of this notice. Your decision to withdraw consent may prevent the MRS Group of Companies from providing products and services to you because the disclosure to third parties is a necessary part of making the product or service available to you.

5. **Using Your Social Insurance Number:** Each MRS company with whom you have an account is required by law to use your social insurance number when submitting tax reports to the Canada Revenue Agency and may provide it to third parties engaged to provide income tax reports. MRS also uses your social insurance number as a unique identifier, to avoid duplication (so that, for example, you do not receive duplicate mailings or get charged the same fee twice) and to ensure that we are aware of all of your holdings (for example, for purposes of determining whether your total holdings exceed a required threshold).
6. **Employees and Agents Who Have Access to Your Client Record:** Employees and agents of each MRS company with whom you have an account may have access to your client record provided they have a specific need to know in connection with the purposes identified in this Privacy Protection Notice. Access is permitted only to the extent necessary for such purposes.
7. **Location of Your Client Record:** Your client record is kept in electronic, microfilm or paper format at MRS offices in Toronto. Paper records forming part of your client record may also be kept in offsite storage in Toronto. Your client record may be transferred to other locations for disaster recovery purposes.
8. **Right to Access and Rectify Personal Information:** Under the Personal Information Protection and Electronic Documents Act (Canada) and similar provincial privacy legislation, you are entitled to access, through a written request, the personal information contained in your client record, including any credit reports obtained by a MRS company, subject to exceptions for certain kinds of information. You may verify this personal information and request that any inaccurate information be corrected. Please contact us through one of the means listed at the end of this notice. If your concerns have not been resolved to your satisfaction, you can contact the Privacy Compliance Officer, MRS Group of Companies, 777 Bay Street, Suite 2100, Toronto, Ontario, M5G 2N4. You may also send an email to privacy@mrs.com.
9. **Changes to Your Personal Information:** Please inform each MRS company with whom you have an account promptly of any change in the personal information that you have provided by contacting us through one of the means listed at the end of this notice. The MRS Group of Companies appreciates your business and promises to handle your questions or input regarding personal information in a prompt and courteous manner.

MRS Client Services:
Telephone: 416-964-0028 or 1-800-387-2087
E-mail: accounthelp@mrs.com

2/06

NATIONAL INSTRUMENT 54-101 EXPLANATION TO CLIENTS

As a non-registered securityholder of a corporation or other issuer, you have the same right as a registered holder to vote at annual and special meeting of that issuer. As your securities are not registered in your name, MRS may provide material directly to you or may, unless you object, provide the issuer with name, address and extent of security ownership so that the issuer can provide material directly to you. The issuers of the securities in your account do not know the identity of the beneficial owner of these securities. We are required under securities law to obtain your instructions concerning various matters relating to your holding of securities in your account.

Receiving Securityholder Materials

You have the right to receive proxy-related materials sent to registered securityholders by reporting issuers in connection with securityholders meetings; among other things, this permits you to receive the necessary information to allow you to have your securities voted in accordance with your wishes at a securityholder meeting. In addition, reporting issuers may choose to send other securityholder materials to beneficial owners, although they are not obliged to do so.

Securities law permits you to decline to receive securityholder materials. The three types of materials that you may decline to receive are:
(a) proxy-related materials, including annual reports and financial statements, that are sent in connection with a securityholder meeting;
(b) annual reports and financial statements that are not part of proxy-related materials; and
(c) materials that a reporting issuer or other person or company sends to securityholders that are not required by corporate or securities law to be sent to registered securityholders.

Disclosure of Beneficial Ownership Information

Securities law permits reporting issuers and other persons and companies to send materials related to the affairs of the reporting issuer directly to beneficial owners of the issuer's securities if the beneficial owners do not object to having information about them disclosed to the reporting issuer or other persons and companies. Part 2 allows you to tell us if you OBJECT to the disclosure by us to the reporting issuer or other persons or companies of your name, address and securities holdings and preferred language.

If you DO NOT OBJECT to the disclosure of your beneficial ownership information, please mark the first box in Part 2 of the form. In those circumstances, you will not be charged with any costs associated with sending securityholder materials to you.

If you OBJECT to the disclosure of your beneficial ownership information by us, please mark the second box in Part 2 of the form. If you do this, all materials to be delivered to you as a beneficial owner of securities will be delivered by us.

Contact

If you have any questions or want to change your instructions in the future, please contact your Advisor. If you wish to change your instructions, you must do so in writing.

Preferred Language of Communication

Section 1 of this account application allows you to tell us your preferred language of communication.

2/06

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