

The Third Party Contributor Form is required when it is determined that a third party, someone other than the subscriber, is funding an agreement. The funds must be in Canadian currency in a bank account held at a Canadian financial institution.

Plan Information

Plan Number (s)	Subscriber First Name	Subscriber Last Name
	Co-Subscriber First name (if applicable)	Co-Subscriber Last name (if applicable)

Third Party Contributor Information

First Name	Last Name	Relationship to Subscriber(s)
Date of Birth	Occupation	Nature of Business
Address Street		
City	Province	Postal Code
Email address	Cell phone	Home phone

Authorization & Acknowledgement

I acknowledge that I do not give instructions on how to deal with the money in this (these) plan(s) and I will not have access to the money in the plan(s).

Third Party Contributor Signature	Date (YYYY/MM/DD)
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I authorize the third party to make contributions to the plan(s)

Subscriber Signature	Date (YYYY/MM/DD)	Co-Subscriber Signature (If Applicable)	Date (YYYY/MM/DD)
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Third Party Contributor Pre-Authorized Credit (PAC) Fund Transfer and Banking Authorization

Financial Institution Information

Transit Number

Institution (Bank) Number

Account Number

Contribution(s)

Amount
\$

Start Date (YYYY/MM/DD)

End Date (YYYY/MM/DD)

Contributions to a Family plan will be split evenly between Beneficiaries unless otherwise directed

Frequency:

Bi-weekly¹

Monthly²

Annual³

One-Time⁴

If the scheduled date of the pre-authorized contribution falls on a weekend or bank holiday, the funds will be deducted on the next business day.

Authorization & Acknowledgement

As the financial institution account holder, please accept my signature at the bottom of this form as my authorization for Embark Student Corp. to withdraw money from the account identified on this form. I acknowledge that:

1. If a PAC is returned by the bank for reason of non-sufficient funds, the bank may attempt again to draw the PAC amount from the account indicated above within thirty days of such return.
2. If the initial deposit date cut-off has passed, the initial deposit and the first ongoing contribution will be taken on next available PAC date.
3. Unless it is a one-time contribution, I may revoke authorization at any time, by providing Embark Student Corp. with a notice in writing 10 business days prior to the next scheduled PAC. To obtain a sample cancellation form or to learn more about my ability to terminate a PAC agreement, I may visit: www.payments.ca, or contact my financial institution.
4. I have certain recourse rights if any debit does not comply with this PAC Agreement. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAC Agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit www.payments.ca
5. Provision and delivery of this authorization to Embark Student Corp. constitutes delivery by that bank/financial institution.
6. This Authorization is provided for the benefit of Embark Student Corp. and any such financial institution agreeing to process debit(s) against my account in accordance with the Rules of the Canadian Payments Association.
7. I undertake to inform Embark Student Corp., in writing, of any change in the account information provided in this authorization at least 7 business days prior to the next scheduled PAC.
8. My financial institution is not required to verify that a PAC has been issued in accordance with the particulars of my authorization including, but not limited to, the amount.
9. My financial institution is not required to verify that any purpose of payment for which the PAC is issued has been fulfilled by Embark Student Corp. as a condition to honouring a PAC issued or caused to be issued by Embark Student Corp. on my account.
10. A PAC may be disputed by me under the following conditions:
 - i. the PAC was not drawn in accordance with my Authorization; or
 - ii. the authorization was revoked.

I understand the above and give Embark Student Corp. the authority to withdraw contribution(s) from the account identified in the above banking information

Name of the Third Party Contributor

Third Party Contributor Signature

Date (YYYY/MM/DD)

¹Based on start date and will be processed on the same day every two weeks.

²Based on start date and will be processed on the same date each month.

³Based on start date and will be processed on the same date each year.

⁴Based on start date and will be processed once.