

Welcome to BMO InvestorLine

BMO INVESTORLINE EDUCATION SAVINGS PLAN (ESP) APPLICATION

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bmo.com/self-directed.	, ,			•	. 3	can access online account applications at
						Please complete:
						All sectionsOnly the relevant sections
. 3,	$\stackrel{\sim}{\Box}$					Only the relevant sections
Account Numbers:	1.			2.		
, , ,	English	French				
	Pro*	BMO Staff	☐ Joint Subscribe		٠ ١ ما	-
firm's Compliance department au		pening of the accou	nt(s).	_		a letter of confirmation from the membe
Choose a self-directed account:	unt(c)2	☐ Family ESP	☐ Family ESP wi	th Options La Ind	dividual ESP 🔲 Individ	dual ESP with Options
Are you transferring an ESP accou						
Yes (see notes below)	σιι γ					
 Please complete our "Regist To ensure we comply with g transferring. If you do not ha 	overnment rule ave this date of	es regarding how lor	ng an RESP account ma	ny stay open (35 years), v e you currently hold the I	we require you to specify t RESP. Please enter the origi	he date you opened the RESP you're nal contract date of the RESP you are
transferring: (YY/MM/DD) L	YYM	MUUU				
Contract Termination Date mu Contract Payment date must b					nto.	
TELL US ABOUT YOURS		,	,			
<u> </u>				o information on the co		
For ESPs please refer to Section For joint subscriber ESPs, a comp						
Citizenship				Country of Residence		
Dual Citizenship (if applicable)						
U.S. persons will need to comple	te a W-9 form.	Please contact BMO	InvestorLine or visit of			
Title Last Name Last				First Name		
Please enter your name exactly a	as it appears o	n your government-	issued photo ID.			
Primary residence address						Suite No.
(No., street, P.O. Box address is n	ot allowed)	1 1 1 1				Postal
Town Primary Phone			Secondary F		Prov	Code
(area code, no.)		Other Day	(area code, rtime	no.)		Ext
No. L.		Phone			Email 	Suite
if different from above L				Postal	ı ı ı ı Marit	No ali i i i i i i i
Town	to of Birth		Prov.	Code	Status	
	ite of Birth Y/MM/DD)	Y M M D	D	SIN (required by the Ca	anada Revenue Agency)	
Employment ☐ Full-time (30 hou Status ☐ Retired (Please p			☐ Part-time (Less the pyer's name, industry,	nan 30 hours per week) city and prov.)	☐ Self employed ☐ Casual/Contract	☐ Unemployed ☐ Seasonal
Occupation						
Employer				Industry Industry		
Employer's Address (number, street)						Suite
City or Town					Prov.	Postal Code
Employer's Phone Number						
If opening a joint account, please	•					
Are you currently employed by? [☐ BMO Financi	al Group 🗆 BMO Ne	esbitt Burns 🔲 BMO In	vestorLine None of th	ne above	
If applicable, please provide Emplo	oyee Identificat	tion Number (EIN)				
Are you, or any member of your in	nmediate famil	y, currently fulfilling,				roles (list is not exhaustive): Government judge or a leader of a political party?
□ No □ Yes (if yes, please con	mplete the foll	owing information b	elow)		,	
☐ Domestic ☐ Foreign / Inte	ernational Orga	inization	Position / Title_			

Please omit this section if the Subscribers' spouse or common-lav											
·	v partner is the Co-subs										
Title Name Name		First Name									
Employer Name		Industry L									
Occupation	v										
WITH YOUR security in mind											
Please create a temporary password, which must be 6 letters and/or change this temporary password.	numbers. When you sign	in to your account	t the first t	ime throu	ıgh our	autom	ated sy	stems,	you v	vill be	asked
Password for											
your Account:											
FINANCIAL information											
Please round to the nearest dollar.	Please provide your	BMO Banking Inf	ormation	(if applica	able).						
Annual Income from all sources	BMO Transit Number			nmper NO Acconi	nt						
Net Liquid Assets (A) (Cash & Securities less loans	BMO Bank Address								-		
outstanding against securities)	-										
Net fixed Assets (B) (Fixed assets less liabilities	Address Continued										
outstanding against fixed assets) Estimated Net Worth (C)	- 										
(C=A+B)	ー」 aries or RESP □ □ し	Jnemployment be	nefits	Social	assista	ınce	□ali	imonv	(spou	sal suc	port)
Annual Income ☐ Retirement income ☐ Inheritance	☐ Real estate inves		estment ir						(
Funding Your ☐ Saving of employment income ☐ Real estate ☐ Account ☐ Investment in securities ☐ Gifts	investment \square Inherita \square Other $_$	ance									
_	ent \square Income Generation										
of the Account ☐ Retirement Savings ☐ Education Savings	☐ Estate Planning	∐ 0th	ner					_			
PLEASE PROVIDE DETAILS if you answer YES to t	the following que	estions									
Are you, or your spouse/common-law partner: An insider, director or senior officer (i.e. an officer or one of the five)			(exchange	or over-th	ne-cour	iter) cor	npany c	or affilia	ate of s	such a	compa
1. Are you, or your spouse/common-law partner: a. An insider, director or senior officer (i.e. an officer or one of the five Or Individually, or as part of a group, own more than 10% of the vo	highest paid employees) o	of a publicly traded		or over-th	ne-cour	iter) cor	npany c	or affilia	ate of s	such a	compa
Are you, or your spouse/common-law partner: An insider, director or senior officer (i.e. an officer or one of the five Or	highest paid employees) o	of a publicly traded		or over-th	ne-cour	iter) cor	npany c	or affilia	ate of s	such a	compa
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FOR OPTIONS account applications				
-				
Number of years trading in options: How would you describe your options trading knowledge?	□ Expert	☐ Knowledgeable	Limited	None
3. Experience with:	None	Long Calls or Puts	Covered	
4. Please indicate what type of options trading you would like to d	o: 🗆 Covered	☐ Long Calls or Puts		
I have received the Risk Disclosure Statement for Futures and Option and that BMO InvestorLine Inc. is not registered to trade in futures.				
Subscriber's Signature			Date YY/MM/I	OD Y Y M M D D
ESP BENEFICIARY INFORMATION The following pers	on is designated as	a Beneficiary entitled to receive	e education assistance	payments under this plan
For more information on Beneficiaries, please refer to Section 4 of For Family Plans, if there are additional Beneficiaries, please compl			агу.	
Citizenship	1 1 1	ountry of Residence		
Dual Citizenship (if applicable)		ıı Firstı ı ı		
Name	Initials	Name Name		
Address: Same as Subscriber Different address (complete se	ction below)			ı Suite ı ı ı ı
residence address				No.
(No., street. P.O. Box address is not allowed) City or			ııı Post	alıııı
Town	<u> </u>		Prov. Code	
Date of Birth (YY/MM/DD) Y Y M M D D SIN (required by the Ca		y)		Gender: □ Male □ Female
Relationship to Subscriber				
If the Beneficiary is less that 19 years of age AND if the Subscriber is no	ot the Custodial Parent	, Legal Guardian or Public Primary Ca	aregiver:	
Name of Custodial Parent, Legal Guardian or Public Primary Caregiver:		Final		
Last Name	Initials	First Name Name		
Address of Custodial Parent, Legal Guardian or Public Primary Caregiver Address: \square Same as Subscriber \square Same as Beneficiary \square Difference of the property of the propert		e section below)		
Primary residence address (No., street, P.O. Box address is not allowed)				Suite No.
City or Town			Prov. Post	
SIGNATURE for self-directed ESP account				
Education Savings Grants Application Do you wish the trustee to apply for any education grants on your If there is more than one beneficiary in the receiving plan, are they			No No	
Canadian Education Savings Plan Grant (CESG)				
Is the Subscriber the Custodial parent, Legal Guardian or the Primar Yes, then complete the "Canada Education Grant Application" – (http://www.bmoinvestorline.com/ApplyNow/forms/BasicAdd No, then complete the "Canada Education Savings Grant Applica	CESG form (#SDE0093 itional_EducationSav) ingsGrant_App.pdf)		
(http://www.bmoinvestorline.com/ApplyNow/forms/BasicAdd				
Alberta Centennial Education Savings Plan Grant (ACES) If the subscriber is eligible for the ACES as defined in the "Alberta R the ACES1 form must be completed.	, .		Alberta Centennial Educa	ation Savings Plan Grant" ther
(http://www.bmoinvestorline.com/ApplyNow/forms/AlbertaEduca Québec Education Savings Incentive (QESI) The trustee will automatically apply for and directly deposit the ba	3	,	vings Plans (RFSP) held v	with BMO InvestorLine No
application form is required.		<u> </u>	5 (21) 11210	
ESP INFORMATION REPORTING Information contained on this application, as well as amounts control to Human Resources and Social Development Canada, the federal graphy for a BMO InvestorLine Education Savings Plan (the bomoinvestorline.com/ApplyNow/forms/Cust_Agr.pdf). I have read applies to have the Plan registered under the provisions of the Incol understand that contributions to the Plan are not tax deductible a tax. I am aware that a penalty tax may apply where contributions for cumulative RESP limit" for the Beneficiary. I certify that the information in this application is true and complet immediately in writing of any material change to the information.	overnment departmore word in accordance wounderstood, and agrower fax Act (Canada) and that any amounts or a Beneficiary mad	ent responsible for the Canada Revith the Terms and Conditions set of ee to be bound by such terms and and any applicable provincial legipaid out of the Plan, other than ree to this Plan and to other RESPs, the such that the plan and the P	venue Agency to taxation ut in the Client Agreeme Conditions as Subscribe stone in my province of funds of contributions, i by myself and by others	n purposes. ents (https://www. r. I request that the promoter f residence set out above. may be subject to income as Subscribers, exceed the
Subscriber's			Date	
Signature			YY/MM/[D Y Y M M D D

SIGNATURE for self-directed ESP account NATIONAL INSTRUMENT 54-101 – SHAREHOLDER COMMUNICATION INFORMATION YOUR PERSONAL INFORMATION BMO Financial Group is committed to respecting and protecting the privacy and confidentiality of your Personal Information and wants to help you understand how we collect, use and share it. Please see our Privacy Code (available at bmo.com/ We are required under securities law to obtain your instructions concerning the various matters below relating to your holding of securities in your account. Please read the National Instrument 54-101, Communication with Beneficial Owners of Securities of a Reporting Issuer, in Section Four, Part C of the Client Agreements. privacy) for details. What is Personal Information? Part 1 - Disclosure of Beneficial Ownership Information Your Personal Information includes information you provided to us or information we collected from other sources about you, such as your name, address, age, financial You may disclose my name, address, email, securities holdings and preferred language of communication (English or French) to issuers of securities I hold with you data, Social Insurance Number, or employment records, and other information that and to other persons or companies in accordance with securities law. could be used to identify you. □No ☐ Yes Why do we need your Personal Information? Note: if you answer "No", you will be responsible for any costs associated with providing shareholder materials to you. We collect your Personal Information to: · verify your identity; Part 2 – 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; ensure we have accurate information about you: understand your financial needs (including your eligibility for products and services you requested or accepted) and to manage our relationship; protect against fraud and manage other risks; and c) materials sent to securityholders that are not required by corporate or communicate with you regarding products and services that may be of interest; securities law to be sent. understand our customers, including through analytics, and to develop and tailor \square I WANT to receive ALL securityholder materials sent to beneficial owners of our products and services; securities. comply with legal or regulatory requirements, or as permitted by law; and □ 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 a reporting issuer or other person or company is entitled to send these materials respond to questions you may have. If we use your Personal Information for a different purpose, we will identify that purpose. to me at its expense). **Sharing your Personal Information** \square I WANT to receive ONLY proxy-related materials that are sent in connection with a BMO Financial Group consists of Bank of Montreal and its affiliates. Your Personal special meeting. Information, including information about your authorized representatives and 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 application form will not apply to annual reports beneficiaries, is shared within BMO Financial Group, to the extent permitted by law, to: ensure we have accurate information about you, and your authorized representatives and beneficiaries, or financial statements of an investments fund that are not part of proxy-related materials. An investment fund is entitled to obtain specific instructions from you on whether you wish to receive its annual report or financial statements. manage our total relationship, provide a better customer experience, · meet your needs as they change and grow, and Part 3 – Preferred Language of Communication I understand that the materials I receive will be in my preferred language of communication if the materials are available in that language. · manage our business. Please see our Privacy Code for details. Part 4 – Consent to Electronic Delivery **Your Choices** Securities law permits us to deliver some documents by electronic means if we With your optional consent, BMO InvestorLine will also share account-specific obtain your consent. information within BMO Financial Group for the purposes described above. This choice only applies to BMO InvestorLine and will apply to all of your BMO InvestorLine accounts unless you later opt out. You can opt out of sharing account-specific information by other BMO Financial Group entities. See our Privacy Code for a list of BMO Financial Group entities and for more information on how to opt-out. ☐ I CONSENT to receiving documents by electronic means and have provided my email in section A of the application. oxdot I DO NOT CONSENT to receiving documents by electronic means. On behalf of the beneficial owner(s) of the account(s) opened from this application, I Please check one option: have read and understand the explanation that you have provided me in connection with the National Instrument 54-101, Communication with Beneficial Owners of ☐ I consent ☐ I DO NOT consent to BMO InvestorLine sharing information in relation to my account(s) within BMO Financial Group. I understand that I cannot opt out of sharing Personal Information between two or more BMO Financial Group affiliates that provide me with a jointly Securities of a Reporting Issuer. The choices I have indicated above apply to all of the securities held in the account(s) A monthly \$2.00 fee per account, plus applicable taxes, will apply for mail delivery offered product or service. of paper statements **BMO Financial Group direct marketing preferences** using the contact information you have provided, to inform you about products and services that we think may be of interest and value to you. Your consent is not Signature ORDER EXECUTION ONLY ACCOUNT ACKNOWLEDGEMENT I acknowledge that BMO InvestorLine Inc. does not give personal or client specific ☐ I consent or tailored investment advice or recommendations to me and does not accept any responsibility to advise me on the suitability of any of my investment decisions or transactions. I acknowledge that I am responsible for any investment decisions as ☐ I DO NOT consent to receive direct marketing materials from BMO InvestorLine or other members of BMO Financial Group.

well as for any profits or losses that may result. I further acknowledge that it is my obligation to comply with the requirements of the Toronto Stock Exchange respecting entry and trading of orders and that BMO InvestorLine Inc. reserves the right to reject, change or remove any order which I may enter or to cancel any trade resulting from an order which I entered which is not in compliance with the requirements of

the foronto	Stoci	CEXCI	iange	2.							
Subscriber's Signature	;										
Date YY/MM/DD	Y	Υ	М	М	D	D					

CARRYING BROKER INFORMATION

Tacknowledge that I have been advised that BMO InvestorLine Inc. is an Introducing Broker and BMO Nesbitt Burns Inc. is a Carrying Broker for my account. BMO InvestorLine Inc. is responsible for all compliance requirements for my account. For accounting and regulatory purposes, I am considered a client of BMO Nesbitt Burns Inc. BMO Nesbitt Burns Inc. is responsible for trade execution and settlement, custody of securities and the preparation of confirmations and account statements. Client cash balances in non-registered accounts are held by BMO Bank of Montreal, and client cash balances in registered accounts are held by BMO Trust Company.

Direct Marketing is our communication with you such as mail, telemarketing or email

I acknowledge that BMO InvestorLine may pay to, or receive from, certain other members of BMO Financial Group a referral fee and that a schedule of these fees and related terms is available upon request and is also included in the Client Agreement. If you consent to sharing of information, we (or if BMO InvestorLine is not the Referring Entity) may disclose information about you to the Receiving Entity in order to make the réferral and allow for the ongoing administration of the referral. The word "information" means financial and financially-related information about you, including information to identify you for products and services or information needed for regulatory requirements.

Subscriber's Signature _									
Date YY/MM/DD	Υ	Υ	М	М	D	D			

SHARED PREMISES DISCLOSURE

I/we acknowledge that, for my/our securities transactions, I/we am/will be dealing with BMO InvestorLine Inc., a Member of the Investment Industry Regulatory Organization of Canada (IIROC) and Member of the Canadian Investor Protection Fund

SIGNATURE for self-directed ESP account (continued)

BMO InvestorLine Inc. may share office space with the following separate but affiliated entities:

- ${\boldsymbol{\cdot}}$ Bank of Montreal offering banking and financial services.
- BMO Investments Inc., a subsidiary of Bank of Montreal Holding Inc., offering mutual fund products by registered mutual fund representatives, and in Quebec, by registered financial planners.
- BMO Nesbitt Burns Inc., a wholly owned subsidiary of BMO Bank of Montreal offering full service advisory services.
- Nesbitt Burns Securities Limited, a wholly owned subsidiary of BMO Nesbitt Burns Inc., offering services to US residents as a US registered Broker-Dealer and Investment Adviser.
- BMO Estate Insurance Advisory Services Inc., a wholly owned subsidiary of BMO Nesbitt Burns offering insurance products by licensed life insurance agents, and in Quebec, by financial security advisors.
- BMO Private Investment Counsel Inc., a wholly owned subsidiary of BMO Nesbitt Burns Inc., offering trading and advising in securities and derivatives by registered individuals.
- BMO Trust Company, a wholly owned subsidiary of Bank of Montreal, offering estate, trust, planning and custodial services.

I/we acknowledge that I/we have read and understood the disclosure, and that I/we understand that these are shared premises.

Subscriber's Signature		
Date YY/MM/DD	Y M M D D	

PERSONAL AND CREDIT INFORMATION AUTHORIZATION

I/We authorize BMO InvestorLine to obtain personal and credit information from a credit reporting company and within BMO Financial Group to verify my identity and prevent theft or fraud.

Subscriber's Signature								
Date YY/MM/DD	Υ	Y	М	M	D	D		

Please provide a verified photocopy of 1 piece of Federal, Provincial or Territorial government issued photo ID.