



**Formal Trust Account Agreement
CIBC Investor Services Inc.**

Account No.

Account Name (name that will appear on all correspondence)

To: CIBC Investor Services Inc. ("CIBC Investor's Edge")

In consideration of CIBC Investor's Edge opening, or if opened, continuing the operation of an account which may include a margin facility or an option facility (the "Account") for the trust identified by the Account Name above (the "Trust"), each undersigned Trustee (collectively, the "Trustee") represents and warrants to CIBC Investor's Edge that the Trust is in full force and effect, and agrees that all transactions for the Account shall be governed, inter alia, by the following terms:

1. The Trustee certifies that it is duly authorized to open the Account, and to instruct CIBC Investor's Edge with respect to the investments of the Trust assets.
2. CIBC Investor's Edge is not bound by, and has no responsibility to observe, the terms of the Trust, or any other trust or agency, whether written, verbal, implied or constructive that may exist. Without limiting the generality of the foregoing, CIBC Investor's Edge has no responsibility for ensuring that investments comply with any investment restrictions that may be set out in the any trust or agency document or in applicable provincial or territorial legislation governing investments made by a trust.
3. CIBC Investor's Edge is authorized and directed to act upon the instructions of any representative of the Trustee identified by the Trustee in writing as an authorized representative with respect to all matters in relation to the Account and the Trust and Trustee shall be liable and responsible for all such actions.
4. The Trustee certifies that it is authorized to engage an investment advisor (or advisors) and to charge the compensation of such advisors against the Trust, including any other related expenses.
5. Each Trustee agrees jointly and severally (this means solidary in Quebec) to indemnify and hold harmless CIBC Investor's Edge against any loss, damages, liability and expenses resulting from any claim which arises as a result of CIBC Investor's Edge following the instructions of the Trustee or any authorized representative of the Trustee, or that may otherwise arise from the reliance by CIBC Investor's Edge on the representations, agreements and certifications of the Trustee.
6. This agreement is binding on CIBC Investor's Edge's successors and assigns and on the Trustee (in its capacity as trustee, agent or otherwise and personally in the case of fraud, willful and/or gross negligence), its agents and their respective heirs, executors, administrators, successors and assigns.
7. If there is any difference between this agreement and any other agreement applicable to the Account, this agreement will apply. This agreement shall be governed by and construed in accordance with the laws of the province or territory in Canada where the Account is maintained and the laws of Canada applicable therein.
8. The parties have requested that this agreement and all related documents be drawn up in the English language only. *Les parties confirment avoir exigé que ce contrat et tous les documents s'y rapportant soient rédigés en anglais seulement.*
9. The Trustee acknowledges that it has read and understands all of the provisions contained in this agreement and that a Trustee has received a copy of this agreement on behalf of all Trustees.

Dated this _____ day of _____, _____ Year

Name of Trustee

Signature of Trustee/Authorized Trustee Representative

Name of Trustee

Signature of Trustee/Authorized Trustee Representative

Name of Trustee

Signature of Trustee/Authorized Trustee Representative

CIBC Investor's Edge Formal Trust Account Agreement

Instructions

Indicate how many Trustees exist for the trust: _____

Complete the Trustee Information section below for each Trustee.

1. Trustee Information

First Name and Initial				Last Name		
_____				_____		

Permanent Address

Street	Apt. No.	City	Province	Postal Code
_____	_____	_____	_____	_____
Date of Birth (mm/dd/yyyy)	Telephone No.	Citizenship		
_____	_____-_____-____	_____		

Trustee Employment Information

Employer's Name	Type of Business	Employer's Telephone No.	Occupation
_____	_____	_____-_____-____	_____
Street	City	Province	Postal Code
_____	_____	_____	_____

Are you, your spouse, any person(s) living in the same home, trading authority, or anyone who exercises influence on this account an Investment Industry Professional? Yes No

Are you an insider of a publicly traded company? Yes No

If Yes, list below

Do you alone or as part of a group hold more than 20% or a control block of a publicly traded company? Yes No

If Yes, list below

Identity Verification – CIBC's acceptable ID: Valid Passport, Valid Driver's License, Birth Certificate (if under the age of 21) or Canadian Citizenship Card

Type of Identification	Identification Reference No.	Place of Issuance
1. _____	_____	_____
2. _____	_____	_____

Primary Financial Institution (only applicable if person is not physically present and identity is verified by confirming account at Financial Institution)

Financial Institution	Bank Transit No.	Bank Account No.
_____	_____	_____
Branch Address		

I hereby consent to the collection of information about me from other financial institutions, and the use of such information and the information provided herein to verify my identity, to protect against fraud and error, and to comply with legal and regulatory requirements, and I consent to its disclosure to regulatory and self-regulatory bodies for regulatory purposes. I acknowledge that if I revoke this consent, any account in which I have a beneficial or other interest may be terminated.

Date (mm/dd/yyyy)

X _____
Signature

CIBC Investor's Edge Formal Trust Account Agreement

2. Trustee Information

First Name and Initial	Last Name
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Permanent Address

Street	Apt. No.	City	Province	Postal Code
Date of Birth (mm/dd/yyyy)	Telephone No.	Citizenship		

Trustee Employment Information

Employer's Name	Type of Business	Employer's Telephone No.	Occupation
Street	City	Province	Postal Code

Are you, your spouse, any person(s) living in the same home, trading authority, or anyone who exercises influence on this account an Investment Industry Professional? Yes No

Are you an insider of a publicly traded company? Yes No

If Yes, list below

Do you alone or as part of a group hold more than 20% or a control block of a publicly traded company? Yes No

If Yes, list below

Identity Verification – CIBC's acceptable ID: Valid Passport, Valid Driver's License, Birth Certificate (if under the age of 21) or Canadian Citizenship Card

Type of Identification	Identification Reference No.	Place of Issuance
1.		
2.		

Primary Financial Institution (only applicable if person is not physically present and identity is verified by confirming account at Financial Institution)

Financial Institution	Bank Transit No.	Bank Account No.
Branch Address		

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Date (mm/dd/yyyy)

X _____
Signature

CIBC Investor's Edge Formal Trust Account Agreement

3. Trustee Information

First Name and Initial	Last Name
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Permanent Address

Street	Apt. No.	City	Province	Postal Code
Date of Birth (mm/dd/yyyy)	Telephone No.	Citizenship		

Trustee Employment Information

Employer's Name	Type of Business	Employer's Telephone No.	Occupation
Street	City	Province	Postal Code

Are you, your spouse, any person(s) living in the same home, trading authority, or anyone who exercises influence on this account an Investment Industry Professional? Yes No

Are you an insider of a publicly traded company? Yes No

If Yes, list below

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Do you alone or as part of a group hold more than 20% or a control block of a publicly traded company? Yes No

If Yes, list below

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Type of Identification	Identification Reference No.	Place of Issuance
1.		
2.		

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Financial Institution	Bank Transit No.	Bank Account No.
Branch Address		

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Date (mm/dd/yyyy)

X _____
Signature

CIBC Investor's Edge Formal Trust Account Agreement

Instructions

Note: It is not necessary to complete any of the following information for settlors or beneficiaries of a testamentary trust.

Indicate how many settlors exist for the trust: _____

Are there any known beneficiaries who are entitled to more than 10% of the income or assets of the trust?

Yes No If yes, indicate how many known beneficiaries exist: _____

Complete the Settlor/Beneficiary Information section below for EACH applicable settlor and 10% beneficiary.

1. Settlor/Beneficiary Information

Please indicate whether the individual is a Settlor Beneficiary

First Name and Initial _____ Last Name _____ Date of Birth _____

Check here if the above-named settlor or beneficiary is a trustee, and the following information has already been collected.

Permanent Address

Street _____ Apt. No. _____ City _____ Province _____ Postal Code _____
Telephone No. _____ Citizenship _____

Settlor/Beneficiary Employment Information

Employer's Name _____ Type of Business _____ Employer's Telephone No. _____ Occupation _____
Street _____ City _____ Province _____ Postal Code _____

Are you, your spouse, any person(s) living in the same home, trading authority, or anyone who exercises influence on this account an Investment Industry Professional? Yes No

Are you an insider of a publicly traded company? Yes No

If Yes, list below

Do you alone or as part of a group hold more than 20% or a control block of a publicly traded company? Yes No

If Yes, list below

Identity Verification – CIBC's acceptable ID: Valid Passport, Valid Driver's License, Birth Certificate (if under the age of 21) or Canadian Citizenship Card

Type of Identification _____ Identification Reference No. _____ Place of Issuance _____
1. _____
2. _____

Primary Financial Institution (only applicable if person is not physically present and identity is verified by confirming account at Financial Institution)

Financial Institution _____ Bank Transit No. _____ Bank Account No. _____
Branch Address _____

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Date (mm/dd/yyyy)

X

Signature

CIBC Investor's Edge Formal Trust Account Agreement

2. Settlor/Beneficiary Information

Please indicate whether the individual is a Settlor Beneficiary

First Name and Initial	Last Name	Date of Birth
<input type="text"/>	<input type="text"/>	<input type="text"/>

Check here if the above-named settlor or beneficiary is a trustee, and the following information has already been collected.

Permanent Address

Street	Apt. No.	City	Province	Postal Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone No.	Citizenship			
<input type="text"/>	<input type="text"/>			

Settlor/Beneficiary Employment Information

Employer's Name	Type of Business	Employer's Telephone No.	Occupation
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street	City	Province	Postal Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Are you, your spouse, any person(s) living in the same home, trading authority, or anyone who exercises influence on this account an Investment Industry Professional? Yes No

Are you an insider of a publicly traded company? Yes No

If Yes, list below

Do you alone or as part of a group hold more than 20% or a control block of a publicly traded company? Yes No

If Yes, list below

Identity Verification – CIBC's acceptable ID: Valid Passport, Valid Driver's License, Birth Certificate (if under the age of 21) or Canadian Citizenship Card

Type of Identification	Identification Reference No.	Place of Issuance
1. <input type="text"/>	<input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>	<input type="text"/>

Primary Financial Institution (only applicable if person is not physically present and identity is verified by confirming account at Financial Institution)

Financial Institution	Bank Transit No.	Bank Account No.
<input type="text"/>	<input type="text"/>	<input type="text"/>
Branch Address		
<input type="text"/>		

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Date (mm/dd/yyyy)

X _____
Signature

CIBC Investor's Edge Formal Trust Account Agreement

3. Settlor/Beneficiary Information

Please indicate whether the individual is a Settlor Beneficiary

First Name and Initial	Last Name	Date of Birth
<input type="text"/>	<input type="text"/>	<input type="text"/>

Check here if the above-named settlor or beneficiary is a trustee, and the following information has already been collected.

Permanent Address

Street	Apt. No.	City	Province	Postal Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone No.	Citizenship			
<input type="text"/>	<input type="text"/>			

Settlor/Beneficiary Employment Information

Employer's Name	Type of Business	Employer's Telephone No.	Occupation
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street	City	Province	Postal Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Are you, your spouse, any person(s) living in the same home, trading authority, or anyone who exercises influence on this account an Investment Industry Professional? Yes No

Are you an insider of a publicly traded company? Yes No

If Yes, list below

Do you alone or as part of a group hold more than 20% or a control block of a publicly traded company? Yes No

If Yes, list below

Identity Verification – CIBC's acceptable ID: Valid Passport, Valid Driver's License, Birth Certificate (if under the age of 21) or Canadian Citizenship Card

Type of Identification	Identification Reference No.	Place of Issuance
1. <input type="text"/>	<input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>	<input type="text"/>

Primary Financial Institution (only applicable if person is not physically present and identity is verified by confirming account at Financial Institution)

Financial Institution	Bank Transit No.	Bank Account No.
<input type="text"/>	<input type="text"/>	<input type="text"/>
Branch Address		
<input type="text"/>		

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Date (mm/dd/yyyy)

X _____
Signature

CIBC Investor's Edge Formal Trust Account Agreement

4. Settlor/Beneficiary Information

Please indicate whether the individual is a Settlor Beneficiary

First Name and Initial	Last Name	Date of Birth
<input type="text"/>	<input type="text"/>	<input type="text"/>

Check here if the above-named settlor or beneficiary is a trustee, and the following information has already been collected.

Permanent Address

Street	Apt. No.	City	Province	Postal Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone No.	Citizenship			
<input type="text"/>	<input type="text"/>			

Settlor/Beneficiary Employment Information

Employer's Name	Type of Business	Employer's Telephone No.	Occupation
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street	City	Province	Postal Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Are you, your spouse, any person(s) living in the same home, trading authority, or anyone who exercises influence on this account an Investment Industry Professional? Yes No

Are you an insider of a publicly traded company? Yes No

If Yes, list below

Do you alone or as part of a group hold more than 20% or a control block of a publicly traded company? Yes No

If Yes, list below

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Type of Identification	Identification Reference No.	Place of Issuance
1. <input type="text"/>	<input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>	<input type="text"/>

Primary Financial Institution (only applicable if person is not physically present and identity is verified by confirming account at Financial Institution)

Financial Institution	Bank Transit No.	Bank Account No.
<input type="text"/>	<input type="text"/>	<input type="text"/>
Branch Address		
<input type="text"/>		

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Date (mm/dd/yyyy)

X _____
Signature

CIBC Investor's Edge Formal Trust Account Agreement

CIBC Use Only

Financial Institution Reference Check (Trustee 1)

Contact Name	Reference Check Name <i>(print name of CIBC staff)</i>	Date <i>(mm/dd/yyyy)</i>	X	_____
_____	_____	_____		CIBC Staff Signature

Financial Institution Reference Check (Trustee 2)

Contact Name	Reference Check Name <i>(print name of CIBC staff)</i>	Date <i>(mm/dd/yyyy)</i>	X	_____
_____	_____	_____		CIBC Staff Signature

Financial Institution Reference Check (Trustee 3)

Contact Name	Reference Check Name <i>(print name of CIBC staff)</i>	Date <i>(mm/dd/yyyy)</i>	X	_____
_____	_____	_____		CIBC Staff Signature

Financial Institution Reference Check (Settlor/Beneficiary 1)

Contact Name	Reference Check Name <i>(print name of CIBC staff)</i>	Date <i>(mm/dd/yyyy)</i>	X	_____
_____	_____	_____		CIBC Staff Signature

Financial Institution Reference Check (Settlor/Beneficiary 2)

Contact Name	Reference Check Name <i>(print name of CIBC staff)</i>	Date <i>(mm/dd/yyyy)</i>	X	_____
_____	_____	_____		CIBC Staff Signature

Financial Institution Reference Check (Settlor/Beneficiary 3)

Contact Name	Reference Check Name <i>(print name of CIBC staff)</i>	Date <i>(mm/dd/yyyy)</i>	X	_____
_____	_____	_____		CIBC Staff Signature

Financial Institution Reference Check (Settlor/Beneficiary 4)

Contact Name	Reference Check Name <i>(print name of CIBC staff)</i>	Date <i>(mm/dd/yyyy)</i>	X	_____
_____	_____	_____		CIBC Staff Signature