



Declaration of Common-Law Relationship Group Policy # 901102

INSTRUCTIONS

This form is to be used when a member/former member declares having a common law spouse and is applying for initial spousal coverage.

1. MEMBER'S INFORMATION

Service Number (SN)	Rank	Surname	First Name	Initials

2. DECLARATION

I hereby declare that I have entered into a common law relationship with

Spouse's Full Name

who is my spouse by virtue of:

1. residing continuously with me; and
2. being publicly represented as my spouse.

Declaration and Authorization by Applicant

- a. I certify that all information given on this form is complete and true in every respect;
- b. I authorize SISIP Financial Services, Manulife Financial or its reinsurers, for underwriting, administration of insurance and claims paying purposes, to gather only the necessary information for the object of the file, from any person or organization that has personal information relating to me;
- c. I also authorize SISIP Financial Services, Manulife Financial or its reinsurers, to disclose only the necessary personal information they have on me to the same persons or organizations specified in paragraph b.

The information provided on this form is protected from unauthorized disclosure under *Canada's Privacy Act* and is available to you upon request.

Member's Signature

Day	Month	Year

Regular Force Members, Please return to:

SISIP Financial Services
National Defence Headquarters
4210 Labelle Street
Ottawa, ON K1A 0K2

Reserve Force & Released Members, Please return to:

Manulife Financial
SISIP Services
PO Box 1030
2727 Joseph Howe Drive
Halifax, NS B3J 2X5