



W	Velcome to BMO InvestorLine ESP CO-SUBS	CRIBER ACCOUNT INFORMATION								
	With the exception of accounts operating in the Province of Quebec, al Please refer to the Client Agreements for details.	l BMO InvestorLine joint accounts are Joint With Rights of Survivorship.								
Α	TELL US ABOUT THE CO-SUBSCRIBER									
-		Der.								
	Citizenship	Country of Residence								
	Dual Citizenship (if applicable) U.S. persons will need to complete a W-9 form. Please contact BMO In	voctorling or vicit our website for this form								
	Last									
	Title Name Name Please enter your name exactly as it appears on your government-iss:	Name Name Name								
	Primary									
	residence address (No., street, P.O. Box address is not allowed)									
	City or Town Town	Prov. Postal Postal Code								
	Primary Phone	Secondary Phone								
	(area code, no.)	(area code, no.) Ext.								
	No. Phone	Email								
	Mailing Address if different from above									
	City or Town	Prov. Code Status								
	No. of Date of Birth Date of Birth									
	pehelingliks (11/mm/pp)	SIN								
	Status Retired (Please provide your last: occupation, employe									
	Occupation									
	Employer	Industry Ind								
	Employer's Address									
	(number, street)									
	Town L L L L L L L L L L L L L L L L L L L	Prov. Code Code								
Employer's Priorie Number If opening a joint account, please complete the "ESP Co-subscriber Account Information" form. Are you currently employed by? BMO Financial Group BMO Nesbitt Burns BMO InvestorLine None of the above If applicable, please provide Employee Identification Number (EIN) Are you, or any member of your immediate family, currently fulfilling, or have fulfilled, a Politically Exposed Person (PEP) position? Examples of PEP roles (list is not exhaustive): Gove										
										of a government agency, president of a state-owned company or bank, a judge or a leader of a political party?
									\square No \square Yes (if yes, please complete the following information below	ow)
									☐ Domestic ☐ Foreign / International Organization	Position / Title
В	FINANCIAL information									
	Please round to the nearest dollar.	Please provide your BMO Banking Information (if applicable).								
	Annual Income	BMO Transit BMO Account								
	from all sources	Number Number								
	Net Liquid Assets (A) (Cash & Securities less loans outstanding against securities)	BMO Bank Address								
	Net fixed Assets (B) (Fixed assets less liabilities outstanding against fixed assets)	Address Continued								
	Estimated Net Worth (C)	I								
	(C=A+B)	□ Unemployment benefits □ Social assistance □ Alimony (spousal support)								
	Annual Income Retirement income Inheritance	les of RESP ☐ Unemployment benefits ☐ Social assistance ☐ Alimony (spousal support) ☐ Real estate investment ☐ Investment in securities ☐ Other								
	Funding Your ☐ Saving of employment income ☐ Real estate in Account ☐ Investment in securities ☐ Gifts	nvestment								
	Intended use	ent Income Generation Savings Estate Planning Other								

CO-SUBSCRIBER'S INFORMATION 1. Number of years trading in options: 2. How would you describe your options trading knowledge?: Expert Knowledgeable Limited None 3. Experience with: None Long Calls or Puts Covered Naked Spreads 1 have received the Risk Disclosure Statement for Futures and Options (Section Three, Part G of the Client Agreements). I understand the special risks pertaining to trading in options and that BMO InvestorLine Inc. is not registered to trade in futures. I declare that I have adequate financial resources to sustain any such transaction in which I participate. Co-Subscriber's Signature Date YY/MM/DD Date YY/MM/DD
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3. Experience with: None Long Calls or Puts Covered Naked Spreads I have received the Risk Disclosure Statement for Futures and Options (Section Three, Part G of the Client Agreements). I understand the special risks pertaining to trading in options and that BMO InvestorLine Inc. is not registered to trade in futures. I declare that I have adequate financial resources to sustain any such transaction in which I participate. Co-Subscriber's Signature
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a. Án insider, director or senior officer (i.e. an officer or one of the five highest paid employees) of a publicly traded (exchange or over-the-counter) company or affiliate of such a company? Or Individually, or as part of a group, own more than 10% of the voting rights attached to all voting securities? Yes No Company Name(s):
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☐ Yes ☐ No Company Name(s):
□ No Company Name(s):
If yes, are you a Reporting Insider under Canadian securities legislation?
☐ Yes ☐ No Company Name(s): ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
b. Separately or in combination with other persons, a holder of more than 20% of the outstanding voting securities of a publicly traded (exchange or over-the-counter) company or affiliate of such a company?
No Company Name(s):
c. Individually, or as part of a group, a member with controlling interest in a publicly traded (exchange or over-the-counter) company or affiliate of such a company?
No Company Name(s):
2. Do you have, or exercise authority over, any brokerage accounts with other financial institutions?
☐ Yes Financial institution(s):
□ No Account Type:
3. Do you have, or exercise authority over, any accounts with BMO InvestorLine?
☐ Yes ☐ No Account #1: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
4. Will any other person have authority over, or any financial interest in, your account(s)? If another person will have authority over your account(s), please complete our "Authorized
Trading Agent or Power of Attorney" form
☐ Yes ☐
No Name: If yes \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Agent, Power of Attorney and Trustee.
☐ Yes If yes, please complete the "Third Party Information" form. Please contact BMO InvestorLine for this form.

SIGNATURES

NATIONAL INSTRUMENT 54-101 - SHAREHOLDER COMMUNICATION

We are required by securities law to obtain instructions concerning the various matters below relating to your holding of securities in your account:

Part 1 - Disclosure of Beneficial Ownership of Information

Part 2 – Receiving Shareholder Materials

Part 3 - Preferred Language of Communication

Part 4 - Consent to Electronic Delivery

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. Please discuss your options with the beneficial owner(s) on the account(s) and provide your instructions on the Account Application Form.

ORDER EXECUTION ONLY ACCOUNT ACKNOWLEDGEMENT

I acknowledge that BNO InvestorLine does not give personal or client specific or tailored investment advice or recommendation to me and does not accept any responsibility to advise me on the suitability of any of my investment decisions or transaction. I acknowledge that I am responsible for any investment decisions as 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 Toronto Stock Exchange. the Toronto Stock Exchange.

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

ESP INFORMATION REPORTINGInformation contained on this application, as well as amounts contributions and amounts of the plan, may be shared with the custodial parent. Information will also be provided to Human Resources and Social Development Canada, the federal government department responsible for the Canada Revenue Agency for taxation

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 (CIPF).

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

- 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.

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

PROTECTION OF YOUR PRIVACY
(Arrangements will be based on the Subscriber's instructions.)
We are committed to protecting all of the personal information you share with us in order to maintain your privacy. It is our top priority to respect and uphold your need for confidentiality. The information we gather is used to verify your identity and protect you and BMO InvestorLine against fraud, to set up and manage products and services you have requested and to satisfy the regulatory obligations of our industry.

You agree that, at the time you begin a relationship with us and during the course of our relationship, we may collect, use and disclose your information for the purpose of, but not limited to, the requirement to: identify you, provide ongoing service, understand your financial needs, protect us both from fraud and error, comply with legal and regulatory requirements, and market products and services to you.

By signing below, I acknowledge that from time to time, BMO InvestorLine may send me information, including direct marketing messages, in order to better understand my needs and make me aware of appropriate products and services. I am also aware that my SIN may be used for administrative and tax reporting purposes.

I may change my preferences stated above at any time by contacting BMO InvestorLine. The servicing of my account as per this agreement is in no way conditional or dependent on my preferences. I acknowledge that I cannot opt out of sharing my personal information where I have requested a product or service that is offered jointly by BMO InvestorLine and another member of BMO Financial Group.

Co-Subscriber's Signature						
Date YY/MM/DD	Υ	M	M	D	D	

I hereby apply for a BMO InvestorLine Education Savings Plan (the Plan) in accordance with the Terms and Conditions set out in the Customer Agreements https://www.bmoinvestorline.com/adviceDirect/pdfs/CustomerAgreementBooklet.pdf). I have read, understood, and agree to be bound by such Terms and Conditions as Co-subscriber. I request that the promoter applies to have the Plan registered under the provisions of the Income Tax Act (Canada) and any applicable provincial legislation in my province of residence set out above. I understand that the contributions to the Plan are not tax deductible and that any amounts paid out of the Plan other than refunds of contributions may be subject to income tax. Lam aware Plan, other than refunds of contributions, may be subject to income tax. I am aware that a penalty tax may apply where contributions for a Beneficiary made to this Plan and to other RESPs, by myself and by others as Subscribers, exceed the "cumulative RESP limit" for the Beneficiary. I certify that the information in this application is true and complete and I agree to the terms and conditions as outlined in the Client Agreements. I also agreeto advise you immediately in writing of any material change in information.

Co-Subscrib Signature	er's
Date YY/MM/DD	Y Y M M D D

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