OMERS

Offer of OMERS membership & authorization for disclosure of personal information

To the employee:

You have the option to enrol in and contribute to the OMERS Primary Pension Plan (OMERS Plan). Use this form to confirm your decision to join the OMERS Plan or not. Joining the OMERS Plan also means joining the OMERS Retirement Compensation Arrangement (RCA) for the OMERS Plan (as applicable).

If you choose to enrol in the OMERS Plan, you can complete section 2 to provide OMERS with consent to disclose your personal information to your employer for reasons other than pension plan administration. You can withdraw your consent at any time by contacting OMERS.

Return the completed form to your employer as soon as possible.

Providing OMERS with your personal information is considered consent for its use and disclosure for the purposes set out in our Privacy Statement, as amended from time to time. You can find out more about our collection, use, disclosure and retention of personal information by reviewing our Privacy Statement at www.omers.com.

SECTION 1 - EMPLOYEE AUTHORIZATION & ELECTION

To the employer:

Use this form to offer OMERS membership to a non-full-time [referred to as other-than-continuous-full-time (OTCFT) in the OMERS Plan text] employee who is eligible for enrolment but for whom membership is voluntary. More information about full-time and non-full-time employees appears on page 2.

If the employee elects to join OMERS, complete an e-Form 102 - Enrolling a member.

Please keep a copy of this completed form indefinitely.

First Name		Employee Number (if known)					
	First Name			Middle Name		Last Name	
Apt/Unit	Address			City		Province	Postal Code
Employee's Email Address				Employee's Phone Number			
Employer Nam	е						
Yes I confirm that: I have been about the ON I choose to both of the OMER	ecome a member S Plan. that my decision is	No I confirm that: - I understand tha - I have been give - I choose not to b - I understand that contact my OMB - I understand that OMERS employ	at I am eligible en information become a me at, should I wi ERS employe at if I apply to ver's next ava	e to become about the mber of sish to apper for this join the fallowed by the	ome a member of the the OMERS Plan. the OMERS Plan. oly to join the OMEF purpose. OMERS Plan at a fu y period after my O	e OMERS Plan. RS Plan at a future o	date, it is my responsibility to ment will take effect in my ceives my election. This date ection is received.
Employee's Sig	gnature	our emplover as so	on as poss	sible.			Date (m/d/y)

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	- 1		

Group Number	Employee Number

SECTION 2 - AUTHORIZATION FOR DISCLOSURE OF PERSONAL INFORMATION - MEMBER CONSENT

If you choose to enrol in the OMERS Plan, you can complete this section to provide OMERS with consent to disclose your personal information to your employer for reasons other than pension plan administration. You can withdraw your consent at any time by contacting OMERS.

Any personal information provided on this form may be used to update your membership profile.

I am currently employed by

and understand that from time to time my employer may request disclosure from OMERS of my personal information for reasons other than pension plan administration. This personal information may include demographic information, hire date, enrolment date, unreduced early retirement date, normal retirement date, and all service information (including with my employer and past employers). I understand that my employer may use this personal information for workforce and succession planning purposes.

In addition, where my employer's benefit plans integrate with OMERS (for example, where there is an offset to a long term disability plan or where an insurance benefit is a multiple of my pension), my employer may require pension information to allow them to administer those plans in accordance with their terms.

I authorize OMERS to disclose to my employer any of the personal information above, as may be requested by my employer from time to time. I understand that I may withdraw such authorization at any time by contacting OMERS.

SIGNED AT	on
City/Province	Date
Member signature	
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Member name (please print)	

SECTION 3 - DEFINITIONS

Non-full-time [referred to as Other-than-continuous full-time (OTCFT) in the OMERS Plan text]: Non-full-time members may include short-term, casual, temporary, seasonal, part-time, 10-month, or certain contract employees.

OMERS membership for non-full-time employees may be voluntary. If voluntary, an employer must offer OMERS membership to a non-full-time employee the first time the employee meets the eligibility requirements.

Non-full-time enrolment in the OMERS Plan generally takes effect in the employer's next available pay period after an employee's election is received. This date can be no later than the end of the month following the month in which the election is received.

Mandatory membership

OMERS membership for all (or any) class of non-full-time employees may be mandatory if stated in the employer's participation by-law or resolution. In that case, non-full-time employees must enrol in OMERS as a condition of employment on the date of hire.

If the employer's participation by-law or resolution is amended to make OMERS membership mandatory, all new eligible non-full-time employees must be enrolled when hired, as a condition of employment. Existing non-full-time employees must be offered the opportunity to enrol on a voluntary basis.

Continuous full-time employees

For OMERS purposes, continuous full-time employees are those who:

- regularly work 12 months in every year, and,
- belongs to a class of employees who regularly works the employer's normal full-time work week, provided the regular employment hours are no less than 32 hours per week.

OMERS membership for continuous full-time employees is mandatory; they must enrol in OMERS immediately when they are hired.