



Dealer / Advisor Change Request

Agora Dealer Services Corp.
6285 Northam Drive, Suite 100, Mississauga, ON L4V 1X5
Toll Free: 1-855-GO-AGORA (462-4672)
Trade Fax: 1-888-642-4312

1. ACCOUNT INFORMATION

CLIENT FIRST NAME	CLIENT LAST NAME	SIN NUMBER
JOINT CLIENT FIRST NAME	JOINT CLIENT LAST NAME	SIN NUMBER

2. AGORA PLANS

I/WE AUTHORIZE THE CHANGE OF DEALER/ADVISOR ON: ALL ACCOUNTS OR ACCOUNTS SPECIFIED BELOW

AGORA PLAN NUMBER(S)	PLAN TYPE	AGORA PLAN NUMBER(S)	PLAN TYPE

3. NEW DEALER/ ADVISOR INFORMATION (Please provide NEW Advisor information below)

ADVISOR NAME	REP CODE	PHONE	EMAIL
JOINT ADVISOR NAME (IF APPLICABLE)		PHONE	EMAIL
DEALER NAME			DEALER CODE
BRANCH MANAGER NAME		PHONE	EMAIL

4. CLIENT AUTHORIZATION

I/WE AUTHORIZE TO CHANGE THE DEALER/ADVISOR ON OUR ACCOUNT(S) TO THE DEALER/ADVISOR INDICATED ABOVE.

CLIENT SIGNATURE	DATE (MM/DD/YYYY)
JOINT CLIENT SIGNATURE (IF APPLICABLE)	DATE (MM/DD/YYYY)

5. ADVISOR(S) AUTHORIZATION

ADVISOR SIGNATURE	DATE (MM/DD/YYYY)
JOINT ADVISOR SIGNATURE	DATE (MM/DD/YYYY)

6. DEALER AUTHORIZATION (MANDATORY)

AUTHORIZED DEALER: BY SIGNING THIS FORM, YOU ATTEST THAT THE ASSETS BEING RECEIVED HAVE BEEN REVIEWED AND THAT YOUR DEALER IS PROPERLY REGISTERED/LICENSED TO OFFER ADVICE AND SUPERVISE THESE ASSETS.

DEALER AUTHORIZATION (MANDATORY)	DATE (MM/DD/YYYY)
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