



NEW CLIENT APPLICATION FORM

ALL QUESTIONS ON THIS PAGE MUST BE COMPLETED



ACCOUNT NUMBER 6 D K X X X

INVESTMENT ADVISOR USE ONLY
PREFERRED LANGUAGE: ENGLISH FRENCH NEW ACCOUNT UPDATE EXISTING INFORMATION ONLY IA CHANGE
IA NO.

ACCOUNT INFORMATION

ACCOUNT HOLDER
Please print name in full
MR. MRS. MS. MISS DR.
First Name Last Name Social Insurance Number
CO-ACCOUNT HOLDER
Please print name in full
MR. MRS. MS. MISS DR.
First Name Last Name Social Insurance Number

If co-account holder is not the account holder's spouse please submit Second Party Account Supplement with this form

Account Holder's Residence Address
Street No. and Name Suite No.
City Province Postal Code
Alternate Address / Company Name
Street No. and Name Suite No.
City Province Postal Code

Mail To: Residence or Alternate Address Location of Income Tax Filing E-mail:
Corporate or Other Tax ID No. Home Telephone
Cellular Business Telephone Fax

Information Required by Securities Regulators

ACCOUNT HOLDER PROFILE SPOUSAL PROFILE
Single Married Divorced Separated Widowed
Name of Spouse
Date of Birth Citizenship: Canadian U.S. Other (Specify)
Employer Name and Address Type of Business
Occupation Years with Employer
Approximate Annual Income From All Sources

Are you a citizen of the United States or a resident alien of the United States for tax purposes? Yes No
Number of Dependents
ESTIMATED NET LIQUID ASSETS + ESTIMATED NET FIXED ASSETS = \$0.00
(Cash and securities less loans outstanding against securities) (Fixed assets less liabilities outstanding against fixed assets) Estimated Total Net Worth

Bank Reference
Bank Name Branch Account Number
Are you a "reporting insider" within the meaning of the regulation? Yes No
If yes, indicate the name of the company and its stock ticker
Do you, alone or as part of a group, have a control position in any such company? If so, please specify.
Have you authorized anyone to use discretion in handling your account? NO YES If yes, please complete Discretionary Agreement
Does anyone other than the persons named on the account:
(a) have any authority over the account? NO YES If yes, state name and include Second Party Account Supplement and T/A:
(b) have any financial interest in the account? NO YES If yes, state name:
(c) Guarantee this account? NO YES If yes, state name
Has the Investment Adviser a direct or indirect interest in the account other than an interest in commissions?
NO YES If yes, give details:
Are you or your spouse an Employee, Director, Partner or Officer of a securities dealer, or of a stock exchange itself or of IIROC?
NO YES If yes, give details:
Do you trade or intend to trade with other investment firms?
NO YES If yes, give name(s) or firm(s):
Do you have any other accounts with Aligned Capital Partners Inc.?
NO YES Account Number(s):

I certify that I am I am not a Politically Exposed Foreign Person (PEP) as defined below
PEP is defined as a person who holds or has held offices or positions in or on behalf of a foreign state:
(a) head of state or head of government; (f) president of a state-owned company or a state-owned bank;
(b) member of the executive council of government or member of a legislature; (g) head of a government agency;
(c) deputy minister or equivalent rank; (h) judge;
(d) ambassador or attaché or counselor of an ambassador; (i) leader or president of a political party represented in a legislature; or
(e) military officer with a rank of general or above; (j) holder of any prescribed office or position
as well as the spouse, common-law partner, child, mother, father, brother, sister, spouse's or common-law partner's mother or father of any such person.
If Yes, please indicate why: