



MUNICIPAL FINANCE AUTHORITY OF BRITISH COLUMBIA

POOLED INVESTMENT FUND - APPLICATION FOR ENROLLMENT

TO: Municipal Finance Authority of British Columbia ("MFABC")
737 Fort Street
Victoria, BC V8W 2V1

The _____ (organization) hereby applies to enroll as a participant in the Pooled Investment Fund Program as established by the Municipal Finance Authority of British Columbia under Section 16 of the Municipal Finance Authority Act under the account name of:

In consideration of MFABC accepting this application and the undersigned subscribing to the Pooled Investment Funds, the undersigned hereby agrees to be bound by the terms and conditions of the Pooled Investment Funds as determined by the Board of Trustees from time to time and also agrees to designate its authorized signatories from time to time. **If the organization is a corporation doing business on behalf of a local government entity, the onus is on the corporation to inform MFABC if the share structure becomes anything less than 100% wholly owned by the municipal entity.**

Signature _____ Signature _____

Print Name _____ Print Name _____

Title _____ Title _____

Date _____

Contact Information:

Contact Name: _____

Accepted by MFABC

Address: _____

Per _____

Date _____

MFABC Account Number _____

Telephone: _____

CIBC Institution Number 91520

Facsimile: _____

CIBC Identification Number _____

Email: _____