



# BOILERMAKERS' NATIONAL BENEFIT FUNDS (CANADA)

Administration Office  
45 McIntosh Drive, Markham, Ontario L3R 8C7

Boilermakers' National Pension Fund (Canada) Plan Registration Number 0366708 and Boilermakers' National Health and Welfare Fund (Canada)

## TEMPORARY FOREIGN WORKERS

**IMPORTANT: THIS ENROLLS YOU IN THE BOILERMAKERS' NATIONAL BENEFIT PLANS (CANADA)**

**TEMPORARY FOREIGN TRAINED WORKER BENEFITS AND PENSION ENROLLMENT**

**Return this Form by Fax (00-1-905-946-2535), or email: [questions@boilermakersbenefits.ca](mailto:questions@boilermakersbenefits.ca)**

Note: The purpose of this form is to inform the Plans about a Temporary Foreign Trained Worker who is employed by an Employer that remits to the Plans. The Plans will use this document to determine benefits for the Temporary Foreign Trained Worker. The completion of this form helps to ensure that the Pension Plan receives the information necessary to provide benefits under the *Employment Pension Plans Act*, Alberta or other applicable legislation.

### TEMPORARY FOREIGN WORKER BASIC INFORMATION (PLEASE PRINT)

Your Name:			
Temporary Canadian Social Insurance Number (This is also the number that your Employer will use to report Contributions to the Plans on your behalf)			
Boilermakers' Union Registration Number			
Your HOME Address (out of Canada) (provide full address, city/town, county, Country)			
Your Email address:			
Your Date of Birth:	Month	Day	Year
Your Marital / Family Status: (Single, Married, Common Law, Separated, Divorced, Widowed)			
Name of Spouse (if applicable)			
Employer's Name (if known)			
Employment Date(s) with Employer (if known) (First date of employment)	Month	Day	Year
I agree to have my pension account invested in the daily interest savings account. I understand that I can change this option later by completing the necessary forms.	YES	<input type="checkbox"/>	NO <input type="checkbox"/>
Date this Form was completed	Month	Day	Year
Name of person who completed this Form			

**Worker's signature**

**Date**

PRIVACY STATEMENT: THE PLANS WILL COLLECT, MAINTAIN AND COMMUNICATE ONLY THE PERSONAL INFORMATION CONSIDERED NECESSARY FOR THE ADMINISTRATION OF THE PLANS. PERSONAL INFORMATION WILL BE PROTECTED PURSUANT TO THE RELEVANT LEGISLATION. THE PLANS MAY USE AND EXCHANGE INFORMATION WITH RELEVANT PERSONS OR ORGANIZATIONS (INSTITUTIONS, INVESTIGATIVE AGENCIES, THE UNION, TRUSTEES, INSURERS, RE-INSURERS, AUDITORS, REGULATORS) IN ORDER TO MANAGE THE PLANS AND ENTITLEMENT TO THE BENEFITS OF THE PLANS. QUESTIONS RELATED TO THE PRIVACY POLICY SHOULD BE DIRECTED TO THE PLANS' ADMINISTRATION OFFICE.

Revised APRIL 2016