

CHANGE OF ADDRESS FORM

Use this form to change your address, telephone number(s) and email address. You can also update this information on the My InSite member portal. Click on Member Sign In button at mspp.ca

INFORMATION ABOUT YOU	Name My Present Employer is				
	Date of Birth	MM / DD / YYYY	MSPP ID #		
	Previous contact information:	Previous contact information:			
	Address				
	City		Province	Postal Code	
	Email Address				
	Phone Number		Cell Phone Number		
NEW CONTACT INFORMATION	Effective Date		MM / DD / YYYY		
	Address				
	City		Province	Postal Code	
	Email Address				
	Phone Number		Cell Phone Number		
CERTIFICATION	I certify that the information given on this form is correct:				
	Sign here:		Date:		
	The Pension Plan requires certain personal information about plan members, their employment and their beneficiaries. For example, a pension plan needs to know the birth dates of its members and their social insurance. On occasion, the Plan may need to share some of this information with actuaries and other pension professionals. The Plan will take all necessary steps to protect the privacy of this information. By participating in the Plan, you are consenting to the plan's collection, use and disclosure of this personal information.				
InBenefits 310-105 Commerce Valley Drive West, Markham, ON L3T 7W3 InBenefits Phone: 905-889-6200 (Option 2) Toll-free: 1-800-287-4816 www.mspp.ca					