



ACCOUNT OPENING FORM

A DIVISION OF LAURENTIAN BANK SECURITIES

Laurentian Bank Tower
 1981 McGill College Avenue, suite 100, Montréal, QC H3A 3K3
 Order-execution service only

Internet Access <input type="checkbox"/> Yes <input type="checkbox"/> No

New Account
 French **English**
 Update, Account No.: _____

Account No. (LB Discount Brokerage use only)

1. TYPE

<input type="checkbox"/> Cash	<input type="checkbox"/> Short Account	<input type="checkbox"/> Options	<input type="checkbox"/> SMB Growth Stock (Quebec only)	CURRENCY: <input type="checkbox"/> \$ CAN <input type="checkbox"/> \$ US
<input type="checkbox"/> Margin	<input type="checkbox"/> C.O.D.	<input type="checkbox"/> Plan Account	<input type="checkbox"/> TFSA (Tax-Free Savings Account)	

2. REGISTRATION OF ACCOUNT

<input type="checkbox"/> Personal	<input type="checkbox"/> Joint	<input type="checkbox"/> Corporate	<input type="checkbox"/> Securities Industry Professional (Please attach your employer's authorization)
<input type="checkbox"/> Investment Club	<input type="checkbox"/> Estate	<input type="checkbox"/> Other	

3. ACCOUNT HOLDER INFORMATION

<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.	First Name	Last Name	
Address		City	Province Postal Code
Country	E-mail		No. of Dependent Children
Telephone (Home)		Telephone (Office)	Cellular / Pager / Other
Country	Social Insurance Number	Date of Birth (DD/MM/YYYY)	
Marital Status			
<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Common-Law <input type="checkbox"/> Civil Union			
Citizenship			
<input type="checkbox"/> Canadian		<input type="checkbox"/> Other, specify: _____ If U.S. citizenship, complete and attach Form W-9.	
Employer	Type of Business	Occupation	Annual Income

SPECIAL INSTRUCTIONS

Mailing Address (if different from above)

Address	City	Province	Postal Code
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Duplicate of trading confirmation Duplicate of account statement

Address	City	Province	Postal Code
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GENERAL QUESTIONNAIRE

<i>Do you have any investment experience?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	No. of Years	No. of Trades Per Year	Portfolio Value
<i>Do you have a brokerage account with another financial institution?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, name of the firm(s)		
<i>Do you have a mandate to trade through a brokerage account from another financial institution?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No			
<i>Does anyone have power of attorney over this account?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, name of the person. Attach Power of Attorney form and ID.		
<i>Does someone else have a financial interest in this account?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, name of the person		
<i>Are you (or your spouse) a director or an officer of a company whose shares are traded on an exchange?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, name of the company		
<i>Do you, individually or as part of a group, have participation of 10% or more in a public company?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, name of the company		

QUESTIONNAIRE GÉNÉRAL (suite)

Are you a person who holds or has held one of the following offices or positions in or on behalf of a foreign state:

- Head of state or head of government, member of the executive council of government or member of a legislature, deputy minister or equivalent rank, ambassador or attaché or counsellor of an ambassador, military officer with a rank of general or above, president of a state-owned company or a state-owned bank, head of a government agency, judge, leader or president of a political party represented in a legislature, holder of any prescribed office or position; or Yes No
- The spouse or common-law partner, the child of, the mother or father, the mother or father of the spouse or common-law partner, the child of the mother or father of a person who holds or has held one of the aforementioned offices or positions in or on behalf of a foreign state. Yes No

If you answered YES to one of the questions above, please provide the details below.

Details: _____

How did you hear about our services?

- Seminar / Trade Show Friend / Family Advertising Solicitation Other: _____

4. SPOUSAL OR CO-HOLDER INFORMATION (This information is required by the Provincial Securities Administrator.)

<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.	First Name	Last Name		
Address		City	Province	Postal Code
Country		E-mail		No. of Dependent Children
Telephone (Home)		Telephone (Office)		Cellular / Pager / Other
Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Civil Union <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Common-Law		Social Insurance Number		Date of Birth (DD/MM/YYYY)
Citizenship <input type="checkbox"/> Canadian <input type="checkbox"/> Other, specify: _____ If U.S. citizenship, complete and attach Form W-9.				
Employer		Type of Business	Occupation	Annual Income

5. FINANCIAL AND INVESTMENT INFORMATION (This information is required by the Provincial Securities Administrator)

Net Worth	Investment Knowledge	Investment Goals	Risk Tolerance
Net liquid assets (cash & securities – loans) \$ _____	<input type="checkbox"/> None <input type="checkbox"/> Limited <input type="checkbox"/> Good <input type="checkbox"/> Excellent	Security _____ %	Low _____ %
Net fixed assets (fixed assets – liabilities) \$ _____		Income + _____ %	Average + _____ %
TOTAL NET WORTH \$ _____		Long-term capital gain + _____ %	High + _____ %
		Short-term capital gain + _____ %	TOTAL: 100%
		TOTAL: 100%	

6. BANK REFERENCES (mandatory)

Name of Financial Institution	Institution No.	Transit ID	Account No.
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Please attach a voided cheque

- In such case that my bank account is held by Laurentian Bank, I authorize LBDB to debit and/or credit this account on my verbal instructions. [Attach Direct Deposit form (41034A)].
- In such case that my bank account is held by a financial institution other than Laurentian Bank, I authorize LBDB to credit this account on my verbal instructions. [Attach Direct Deposit form (41034A)].

7. OPTIONS ACCOUNT (to be completed only when the client wants to trade options with this account)

Knowledge of Options <input type="checkbox"/> None <input type="checkbox"/> Limited <input type="checkbox"/> Good <input type="checkbox"/> Excellent	Do you have an options account with another brokerage firm? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, name of the firm: _____ How many years have you been trading options? _____	Levels <input type="checkbox"/> 1. Opening purchase transactions and closing sales <input type="checkbox"/> 2. Sale of covered options <input type="checkbox"/> 3. Spreads <input type="checkbox"/> 4. Short sales Note: Each level includes those that precede it.
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COMMENTS/RESTRICTIONS

FOR THE USE OF LAURENTIAN BANK DISCOUNT BROKERAGE

Approval of drop	Date
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8. ADDITIONAL INFORMATION

" TO: Laurentian Bank Securities"

I hereby acknowledge that Laurentian Bank Discount Brokerage is not permitted to give investment advice regarding securities, and that it accepts no responsibility with respect to the appropriateness of any buy, sell or orders it may receive.

The above information is complete and accurate, and Laurentian Bank Securities may rely thereon until I indicate any significant change. I acknowledge having taken cognizance of the terms and conditions of the Account Agreement and accept them. In the event of an options account, I acknowledge having taken cognizance of the terms and conditions of the Client Trading Agreement and accept them. In the event of an options account, I acknowledge receiving the current version of the disclosure document for recognized market options advising of the duties, responsibilities and risks associated with options trading including the section therein entitled "Risks in Options Trading". It is understood that a margin account entails the borrowing of sums of money for account transactions, except if a cash account is requested above. The undersigned accepts the terms of the margin account agreement. Where I have been referred to Laurentian Bank Discount Brokerage by Laurentian Bank of Canada ("the Bank") and/or one of its subsidiaries, I consent to the transfer of my personal information from one institution to the other.

I acknowledge having been informed that a payment will be made by Laurentian Bank Securities to Laurentian Bank following a reference verification.

The National Instrument 54-101 form (Communication with Beneficial Owners of Securities) must be completed to open an account.

The services of Laurentian Bank Discount Brokerage are open to residents of Quebec and Ontario only. Services are not available to residents of other provinces nor outside Canada.

NOTE: Laurentian Bank Discount Brokerage is a division of Laurentian Bank Securities Inc., subsidiary of Laurentian Bank.

- * Securities purchased through Laurentian Bank Discount Brokerage are neither guaranteed by the Bank nor insured by the Canada Deposit Insurance Corporation or other government deposit insurance agency.
- * Securities are subject to market fluctuations.
- * Client files are subject to regular inspection by the regulatory authorities.

Account Holder Signature: _____

Date: _____

Co-account Holder Signature: _____

Date: _____

The co-account holder must also supply required ID.

MEMBER OF THE CANADIAN INVESTOR PROTECTION FUND

9. NOTE

For regulatory purposes, self-regulatory organizations including Market Regulation Services Inc., the Investment Dealers Association of Canada, the Mutual Fund Dealers Association of Canada, Bourse de Montréal Inc., and the Canadian Investor Protection Fund (collectively, "SROS") require access to personal information of current and former clients, employees, agents, directors, officers, partners and others that has been collected or used by regulated persons. SROS collect, use or disclose such personal information obtained from regulated persons for regulatory purposes, including:

- Surveillance of trading-related activity,
- Sales, financial compliance, trade desk review and other regulator audits,
- Investigation of potential regulatory and statutory violations,
- Regulatory databases,
- Enforcement to disciplinary proceedings,
- Information sharing with securities regulatory authorities, regulated marketplaces, other self-regulatory and law enforcement agencies in any jurisdiction in connection with any of the foregoing.

Being a regulated organization, we must decline to accept or administer an account in respect of which an individual does not consent to such intended collection, use or disclosure of personal information to SROS and the use and disclosure of that information by SROS.

FOR USE BY LAURENTIAN BANK BRANCH ONLY		
<input type="checkbox"/> Existing client <input type="checkbox"/> Client referred by: _____ Name in block letters	Client Identification Enter below two (2) ID numbers from the following: driver's license, passport, medicare card. Attach a photocopy of one of these. Account Holder _____ Co-account Holder _____	Important: The "Letter of Disclosure" Form (41805A) must be signed by the Client for referral purposes. The form is available on the Laurentian Bank's intranet. _____ Transit Employee No. Name of Employee _____ Date Telephone No. Employee Signature
FOR USE BY LAURENTIAN BANK DISCOUNT BROKERAGE		
Comments	Approval of Officer	Date

ACCOUNT OPENING AGREEMENT

I request that Laurentian Bank Securities open one or more Accounts for me and I understand that the following terms and conditions shall apply to my Account and to any Securities transaction.

1. **DEFINITIONS:** In this agreement, the following words and expressions shall be defined as follows:
 "LBS": shall mean Laurentian Bank Securities.
 "Account": shall mean any and all brokerage accounts opened by me at LBS
 "Securities": shall mean any and all stocks, debentures or other Securities that I hold from time to time in my Account.
2. **SAFEKEEPING:** LBS or any mandatory of its choice will provide safekeeping for the Securities that are delivered by me or for my Account. In order to do so, LBS may hold Securities that are not in bearer form in its own name, in the name of its mandatory or in the name of a clearing agency. In addition, LBS shall make payment for purchased Securities from the funds available in my Account, receive payment for any sold Securities and shall credit or debit my Account as the case may be.
3. **RULES:** All transactions are subject to the constituting documents, by-laws, customs and usages of the exchange or market (including its clearing house if applicable) where they are carried out by LBS or its mandatory and to all laws, regulations or orders applied by governmental or regulatory authorities.
4. **STATEMENTS:** LBS will send me quarterly statements or, where transactions have occurred during the month, a monthly statement of my Account, which will be sent by regular mail to the last address of record in the registers of LBS.
5. **VERIFICATION OF STATEMENTS:** Subject to Section 11, I shall promptly examine all the information appearing on the statements and notify LBS of any error, omission or objection relating thereto within thirty (30) days of the date of the statement. At the expiry of the delay, such information shall be deemed complete and accurate and shall be opposable to me.
6. **TRANSACTIONS BY TELEPHONE OR OTHER ELECTRONIC MEANS:** LBS may at its discretion accept any instruction that appears to be given by me by telephone, telegraph, cable, fax, electronic mail or other electronic means without verification or inquiry beyond my Account number. LBS may record any telephone conversation with me. I release LBS of any responsibility for having acted or not acted on the instructions received by any means indicated above and I agree to indemnify LBS against any loss, damage or expense that it may incur for having followed the instructions received.
7. **PAYMENT:** I agree to pay LBS at the latest on the settlement date for any purchase. LBS may debit my Account for any such payment.
8. **DELIVERY:** In the event that I do not deliver on time to LBS or transfer Securities that I sell or if the delivered Securities are not in a form considered acceptable by the purchaser or if the Securities are returned by the purchaser because they were not properly delivered, LBS may borrow or purchase such Securities in order to deliver them. I agree to reimburse LBS for any loss incurred by it due to the purchase or borrowing of such Securities and to pay LBS the amount of any purchase on the settlement date.
9. **OVERDRAFT:** Unless provided in a prior agreement with LBS, I shall not overdraw my Account. If, however, an overdraft occurs, I shall immediately reimburse such overdraft as well as the interest thereon at the rate in force charged at that time by LBS. Interest shall be calculated daily and be payable monthly according to the policies in force from time to time at LBS.
10. **SECURITY:** In order to secure my present and future obligations under this agreement, I hereby grant to LBS a conventional hypothec with delivery in the amount of \$100,000 and/or any amount that is due by me (in provinces other than Quebec, I grant a continuing security interest) on all Securities and other property in my Account or otherwise held by LBS. In addition, LBS may debit my Account of any sum owing by me.
11. **CONFIRMATION OF TRANSACTION:** Any transaction of Securities indicated in a written confirmation or notice (other than a statement provided in section 5) is deemed to be correct if I do not notify LBS of any error within five (5) days from the date on which I am deemed to have received such confirmation or notice. In the case of a telephone confirmation, the transaction shall be deemed correct if I do not notify LBS of any error during the call.
12. **CREDIT BALANCE:** Any credit balance in my Account shall be considered a debt of LBS towards me and shall bear interest at the rate in force from time to time at LBS. Interest shall be calculated daily and deposited monthly in my Account according to the policies in force from time to time at LBS.
13. **FOREIGN CURRENCY:** Transactions carried out in a foreign currency may be converted to Canadian dollars at the conversion rate and according to the procedure in force from time to time at LBS.
14. **TAXES:** LBS may debit my Account for the payment of all applicable taxes including those relating to goods and services. I undertake to advise LBS of any change in my Canadian residency status and to reimburse any amount paid by it to the relevant taxing authorities regarding my Account.
15. **VOTING INSTRUCTIONS:** I am responsible for transmitting on time to LBS my voting instructions regarding the exercise of any subscription, conversion or other rights or regarding any amalgamation, consolidation, reorganization, liquidation, bankruptcy or insolvency proceedings or arrangement with creditors or the deposit of Securities (relating to the foregoing or to any take-over or issuer bids) or any other similar market event.
16. **DISCLAIMER:** I acknowledge that LBS cannot be held responsible for any losses that I may incur in my Account or that result from transactions carried out according to instructions received, regardless of the cause, including any loss resulting from restrictions or decisions imposed by regulatory authorities or exchanges, suspension of transactions, wars, strikes, or any other events over which LBS has no control.
17. **EXPENSES AND FEES:** I agree to pay LBS its commissions or operation costs in addition to any expenses paid or incurred by it or its mandataries in relation to the transactions provided herein and authorize LBS to debit such charges from my Account. LBS may from time to time modify the commissions without prior notice.
18. **AMENDMENTS:** LBS may amend the terms and conditions of this agreement upon thirty (30) days prior notice.
19. **NOTICES:** All statements, confirmations, communications or notices shall be validly delivered when sent by mail to my last address of record in the registers of LBS and shall be deemed received within five (5) days of the date on which they were mailed, or on the same day if delivered to me in person, by fax or other electronic means.
20. **SUCCESSORS OR ASSIGNS:** This agreement binds my successors, executors, administrators and assigns and the successors and assigns of LBS.
21. **INTERPRETATION:** Wherever required by the context, the singular may be interpreted as the plural, the masculine as the feminine and vice versa and shall include a legal person, as the context may require.
22. **APPLICABLE LAWS:** This agreement shall be subject to and construed in accordance with the laws of the province where the office of LBS at which the account is opened is located.
23. **SEVERABILITY:** If any of the provisions of this agreement is invalid or unenforceable under the laws of the territory where its enforcement is being sought, the other provisions of this agreement shall in no way be affected and each provision of this agreement shall be valid and enforceable to the fullest extent permitted by law.
24. **PERSONAL INFORMATION:** For the purposes of my application, I accept that LBS create a file relating to the services covered by this agreement. I allow access to my personal and financial information by persons that I have authorized as well as by employees, mandataries or agents of LBS on the condition that this information is necessary to the performance of their duty or the carrying out of their mandate.
25. I authorize LBS and its affiliates to use the personal and financial information regarding myself held by LBS for the purposes of offering me new products or services.
 I understand that my financial situation and my solvency are essential considerations upon which you rely. Consequently, I authorize you, as long as I maintain an account with you, to obtain from any financial institution, personal information agency, employer, landlord or any other person, any and all information that you deem useful regarding my financial situation and solvency and to this effect, I authorize you to remit a copy of this authorization to any of such persons.
26. I have the right to examine my file, and, if needed, to correct any error in the personal information contained therein. Should I wish to examine my file and, as the case may be, correct it, I shall communicate with the LBS Client Services Department at 514-350-2800 or write to the last address that was transmitted to me.
 The above information is complete and accurate, and LB Securities may rely thereon until I send a written notice indicating any significant change. It is understood that a margin account entails the borrowing of sums of money for account transactions, except if a cash account is requested above. The undersigned accepts the terms and conditions of the margin account agreement.
 Where I have been referred to LB Securities by Laurentian Bank of Canada (the "Bank") and/or one of its subsidiaries, I consent to the transfer of my personal information from one institution to the other and acknowledge having been informed that the Bank will be paid by LB Securities as a result of this reference.
 Note:
 - * LBS is a separate entity from the Bank.
 - * Securities purchased through LBS are neither guaranteed by the Bank nor insured by the Canada Deposit Insurance Corporation or other governmental deposit insurance agency.
 - * Securities are subject to market fluctuations.
 - * I acknowledge having taken cognizance of the terms and conditions of the Account Opening Agreement and accept them.