

**UNIVERSITY OF CALGARY TRUST EMPLOYEE
SETTLEMENT OF CLASS PROCEEDING**

OPT-OUT FORM

(Alberta Court of Queen's Bench
Action No. 1001-09969)

Print clearly in black or blue ink. Complete this Form only if you wish to be excluded from participating in the
University of Calgary Trust Employee Settlement.

1. Your Name and Contact Information	
Name: _____	
Address: _____ City: _____	
Province/State: _____ Postal Code/Zip: _____ Country: _____	
Email: _____ Phone/Mobile: _____	
2. Were you a Trust Employee at the University of Calgary? ____ Yes ____ No	
3. Are you completing this form on behalf of a Trust Employee? ____ Yes ____ No	
If Yes, list the name and address of the Trust Employee for whom you are completing this form and your relationship to the Trust Employee: _____ (*Note that you can only opt-out on someone else's behalf if you are an heir, executor, administrator or other legal representative of the person.)	
5. Are you a lawyer acting for the Trust Employee listed above or for an heir, executor, administrator or other legal representative of the Trust Employee? ____ Yes ____ No	
Lawyer's Name and Signature: _____ _____	

UNLESS YOU PROPERLY COMPLETE AND RETURN THIS OPT-OUT FORM, YOU WILL BE BOUND BY THE SETTLEMENT AND YOU WILL NOT BE PERMITTED TO PURSUE ANY LITIGATION ON MATTERS RESOLVED IN THIS SETTLEMENT.

Dated: _____

Submitted by: _____ (Printed)

Signed: _____ (Signature)