



Group RRSP Quote Request

Advisor Name:		Potential Effective Date of Plan:	
Advisor Email:			
Company/Prospect Name:			
Business Address:			
City:	Province:	Postal Code:	
Phone:	Fax:		
Nature of Business:		Current Group Retirement Provider (if applicable):	
# of Eligible Employees:		Anticipated Annual Plan Contributions:	
Employer contribution:		Assets in Existing Group RRSP (if applicable):	
Email quote to:		connect@clearbenefits.ca	

Notes: (i) if your client has an existing defined contribution pension plan or other non-group RRSP plan type, please provide additional detail in an email.
(ii) An employer contribution is required for a plan to be established with The Co-operators. Also, the employer must be willing to allow group education sessions.
(iii) Anticipated annual plan contributions is the total of employer and employee contributions. A \$10,000 minimum for the plan is required.