



**Municipal  
Pension Plan**

**YOUR PENSION,  
YOUR FUTURE  
SEMINAR SCHEDULE**

**Municipal Pension Plan  
Seminar Services**  
PO Box 9460  
Victoria BC V8W 9V8

Location 2995 Jutland Road, Victoria

Web [mpp.pensionsbc.ca](http://mpp.pensionsbc.ca)

Victoria 250 356-8547  
Toll-free in BC 1 877 558-5573  
Fax 250 953-0415  
E-mail [MPPseminars@pensionsbc.ca](mailto:MPPseminars@pensionsbc.ca)

Membership *does* have its privileges. Your contributions to the Municipal Pension Plan now will be your income down the road. Come and see what your future holds.

Register online at [mpp.pensionsbc.ca](http://mpp.pensionsbc.ca). Or use this schedule with the accompanying [seminar registration form](#).

**Dates are subject to change. Pre-registration is required.**

**MARCH 2010**

Date	Time	City or Town	Venue
9	2:00 p.m. to 3:30 p.m.	Prince George	Ramada Prince George
18	2:00 p.m. to 3:30 p.m.	Richmond	Best Western Abercorn Inn

Please watch [mpp.pensionsbc.ca](http://mpp.pensionsbc.ca), as more seminars will be offered in the near future.

**Note: Seminar dates and locations may change. Please visit us online for current dates and locations.**



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AND SCHEDULE**

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**INSTRUCTIONS FOR PLAN MEMBER:**

- You can apply online at [mpp.pensionsbc.ca](http://mpp.pensionsbc.ca). Alternatively, **mail or fax** this completed form to the pension plan as soon as possible; some seminars fill up quickly and others may be rescheduled if registration is low. We will confirm your attendance, and the date and location, by e-mail or mail.
- **If the seminar takes place during the hours you are scheduled to work, it is your responsibility to obtain permission from your employer to attend. Please do not finalize your arrangements until you have received your confirmation.**
- All plan members are welcome to attend, including those receiving long-term disability (LTD) benefits. We encourage you to bring your spouse or a guest.

PLAN MEMBER LAST NAME	PLAN MEMBER FIRST NAME
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MAILING ADDRESS – (include street, city or town, province and postal code)

E-MAIL ADDRESS

HOME PHONE – (include ten digits)	WORK PHONE – (include ten digits)	PERSON ID – (enter either the Person ID from your Member's Benefit Statement or your SIN) <b>(must be completed)</b>
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EMPLOYER NAME	Will you bring your spouse or a guest? <i>Please check (✓) one</i> <input type="checkbox"/> YES <input type="checkbox"/> NO
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**Your Pension, Your Future Seminar** provides great information for new and mid-career members. If you are nearing retirement, we recommend you attend the **Thinking About Retiring Seminar**.

Indicate your age by checking (✓) one below

- 35 or younger   
  36 – 44   
  45 or over

Enter your first, second and third choices of seminar dates (see schedule attached).  
If your first choice is full, you will be enrolled in your second or third choice.

CHOICE	SEMINAR DATE YYYY / MM / DD	CITY OR TOWN	TIME
1st			
2nd			
3rd			

Freedom of Information and Protection of Privacy Act—The personal information on this form is collected under the authority of the *Public Sector Pension Plans Act* and will be used by the Pension Corporation to administer a plan member's pension and other non-pension benefits. If you have any questions about the collection and use of this information, contact the Chief Executive Officer at 2995 Jutland Road, Victoria BC V8T 5J9 or by telephone at 250 387-1002.