



Divested OMERS member (notice of member event)

Use this form when a divested OMERS member terminates employment, retires or dies.

To help us serve you better, submit your documents quickly and securely using the e-access portal. Start a new conversation, attach your files, and submit.

Providing OMERS with your personal information is considered consent for its use and disclosure for the purposes set out in our Privacy Statement, as amended from time to time. You can find out more about our collection, use, disclosure and retention of personal information by reviewing our Privacy Statement at www.omers.com.

SECTION 1 - MEMBER INFORMATION

OMERS Membership Number		<input type="checkbox"/> Retirement		<input type="checkbox"/> Termination		<input type="checkbox"/> Death	
<input type="radio"/> Mr. <input type="radio"/> Mrs. <input type="radio"/> Ms. <input type="radio"/> Other:		First Name	Middle Name	Last Name			
Apt/Unit	Address		City		Province	Postal Code	

Date of Termination/Retirement/Death (m/d/y)
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Any Unpurchased Breaks in Service or Leaves? Yes No

If Yes:

Reason for Break(s):

Date(s) of Break(s):

From:	To:
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From:	To:
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SECTION 2 - AUTHORIZATION

Organization						
Contact Name			Title			
Suite/Unit	Address		City		Province	Postal Code
Phone		Fax	Email			

Signature of Authorized Signing Officer

Date (m/d/y)