

Students Trust International Plan
C/O O'Shaughnessy Education Foundation
The Exchange Tower, PO BOX 427
130 King Street, W Suite 1800,
Toronto, Ontario, M5X1E3

Dear Customer Service,

Re: Plan change request
件名 プラン変更について

I (We) have just enrolled into Students Trust International Plan. Although I (We) want to change the plan as follows.

The details for the agreement as follows:

Plan change request for

Remove
削除

Add
追加

(×印で選択ください)

GRF
加入費返戻特約

STI Plus
プラスプラン

(×印で選択ください)

Agreement #	証書番号	:	_____
Primary Subscriber	契約者	:	_____
Joint Subscriber	準契約者	:	_____
Beneficiary	学資金受取人	:	_____
Date of enrolment	お申込日	:	_____
Units	口数	:	_____

Primary Subscriber Signature
契約者ご署名

Joint Subscriber Signature
準契約者ご署名

Dated this _____ (day) of _____ (month) _____ (year)
日付 日 月 年