

OPT IN FORM

TO: Newfoundland and Labrador Sex Abuse Class Action,
c/o Trilogy Class Action Services,
117 Queen St., P.O. Box 1000,
Niagara-on-the-Lake, Ontario, LOS 1J0,
Tel (toll-free): 1-877-400-1211, Fax: 416-342-1761,
www.NFLDsexabuseclassaction.ca inquiry@NFLDsexabuseclassaction.ca

This is **NOT** a claim form. Any person who is resident outside Newfoundland and Labrador who does not complete this **OPT IN FORM** will be excluded from receiving any compensation arising out of any settlement or judgement in the class proceeding named below:

*Note: To opt in, this form must be properly completed and sent to the above address, postmarked no later than **DECEMBER 30, 2019.***

2017 01G 2568
IN THE SUPREME COURT OF NEWFOUNDLAND AND LABRADOR
GENERAL DIVISION

BETWEEN:

JANE DOE (#7), ~~JOHN DOE (#9)~~ (Discontinued), JOHN DOE (#10)
AND JOHN DOE (#11)

PLAINTIFFS

AND:

HER MAJESTY IN RIGHT OF NEWFOUNDLAND AND LABRADOR

DEFENDANT

I understand that by opting in to this class proceeding, I am confirming that I wish to participate in this class proceeding and I understand that the representative plaintiffs will have the right to direct the resolution of my claim.

I understand that by opting in to this class proceeding I will be bound by any judgement of the Court, whether favourable or not.

I understand that by opting in to this class action, by name will not be made public.

I choose to opt in of this class action.

Signature of Witness:

Signature of Class Member Opting In:

Name of Witness:

Name of Class Member:

Telephone:

Date: