UNIVERSITY OF TORONTO ALUMNI ASSOCIATION PROXY FORM

I, the unders	signed Member of t	he University of Toronto Al	umni Association (UTAA), hereby appoint:	
		President, UTAA (or desig	nate) or failing him,	/her	
	(name of proxy)				
as my Proxy	to attend and vote	or otherwise act on my bel	half in connection v	with all matters at the A	nnual
General Me	eting of Members o	f the UTAA to be held on Sa	aturday, June 2, 20	18, at the hour of 11:00	a.m. at
Convocation	Hall, and at any ac	journment thereof, and that	at such appointmer	nt be subject to the follo	owing
instructions	or restrictions (if ar	ıy):			
		DATED at	this	day of	, 2018.
		Signed:			
Print full nar	me and provide info	rmation listed below:			
Name at gro	aduation if different	from above:			
Address:	*Street			_(include apt or suite)	
	*City			_	
	*Postal Code: _				
	*Home Ph:		Alternate Ph:		
	*Email address	•			
*College or l	Faculty of Graduati	on:			
*Year of Gra	aduation:				
DIS Number	:	(to be comp	oleted by the Divisio	on of University Advance	ement)
Full name of	f proxy holder:				
Full Mailing	address:				
Ph:		Alternat	e Ph:		
College or Fo	aculty affiliation (if	any)			

Email address: _____

IN ORDER TO BE CONSIDERED FOR VALIDATION, THE PROXY FORM MUST BE LEGIBLY AND FULLY COMPLETED INCLUDING ALL MANDATORY FIELDS AS INDICATED BY THE *ASTERISK.

The U of T Alumni Relations will determine the validity of the proxy based on the verification of the proxy grantor's alumni status.

The person appointed as your proxy holder need not be a Member of the UTAA, and the executed proxy must be deposited at the UTAA's head office, or received by mail c/o University Advancement, Attn. UTAA Secretariat, 21 King's College Circle Toronto, Ontario M5S 3J3, **at least 48 hours** (excluding Saturdays, Sundays and legal holidays) preceding the meeting, or any adjournment thereof.