



DIABETES PROTECT TO WIN CONTEST ENTRY FORM

Participant's Policy number: _____

Participant's Name: _____

I hereby consent to enter the Diabetes Protect to Win Contest (the "Contest") organized by Sun Life Assurance Company of Canada (the "Organizer"). By signing this form, I acknowledge and agree to the following:

1. I confirm that I am a legal resident of Canada and have reached the age of majority in my province or territory of residence.
2. I have read, understood, and agree to abide by the official Contest rules.
3. I consent to the collection, use, and disclosure of my personal information by the Organizer for the purposes of administering the Contest and awarding prizes, including the public announcement of my name by the Organizer if I win a prize.
4. I release the Organizer from any liability related to my participation in the Contest or my acceptance and use of any prize awarded.

Participant's Signature: _____ Date: _____

Contact Information: Phone: _____ Email: _____