WHL Hockey League Class Action P.O. Box 4454 Toronto Station A 25 The Esplanade Toronto, ON M5W 4B1





Must Be Sent Via Email To CHLClassAction@ricepoint.com No Later Than September 10, 2020

## Western Hockey League Class Action Opt-Out Form

CLAIMANT INFORMATION			
First Name	M.I. Last Name	9	
Primary Address			
Primary Address Continued			
City		State	ZIP Code
Foreign Province	Foreign Postal Code	Foreign Country	y Name/Abbreviation

If you are a Class Member who completes and submits this form, you will be irrevocably opted out of the Western Hockey League ("WHL") class action and you will be <u>excluded</u> from any further participation in the class action, including in the Settlement of this action which has been reached between the parties, subject to approval of the Alberta Court of Queen's Bench (the "Court").

By opting out, you are confirming that you do not wish to be a Class Member and that you do not want to participate in the Settlement.

If you are not a Class Member any longer, you will <u>not</u> be eligible to receive any benefits from the Settlement or damages that may be awarded by the Court should the Settlement be rejected by the Court and the matter proceed to a common issues trial.

## DO NOT SUBMIT THIS FORM IF YOU WANT TO REMAIN IN THE CLASS ACTION.

This form must be fully completed and received no later than **September 10, 2020.** Opt-Out Forms received after **September 10, 2020** will not be valid.

For more information on the WHL class action, please see the Notice of Certification of Western Hockey League Class Action enclosed with this Opt-Out Form, visit <a href="https://www.chlclassaction.com">www.chlclassaction.com</a>, or contact Class Counsel as follows:

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Email: dcharney@charneylawyers.com

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Email: jmandryk@goldblattpartners.com



FOR CLAIMS PROCESSING ONLY		DOC	RED		
	СВ	LC REV	A B		
		KL v	В		

## **DECLARATION**

I declare that I wish to opt out of the WHL class action.

I declare that I have read the foregoing and understand that, by opting out of the WHL class action, I will no longer be a Class Member and will never be eligible to receive compensation from any Settlement or judgment awarded by the Court in this action.

Signature:				_	Dated	(mm/dd/	уууу):		
Print Name:				_					
Email address							_		
Area code	Telephone number	(home)		Area co	de	Telepho	ne numbei	(work)	

Return completed Opt-Out Forms to: CHLClassAction@ricepoint.com

