

TWC ENTERPRISES LIMITED

Enrolment Form

TWC Enterprises Limited's Shareholder Dividend Reinvestment Plan

Please refer to the Plan, and, if available, the Plan Offering Circular before enrolling

Copies of the Plan are available online at:
www.tsxtrust.com
or
www.twcenterprises.ca

To: TSX Trust Company ("TSX Trust")

I wish to enrol in TWC Enterprises Limited's ("TWC") Shareholder Dividend Reinvestment Plan (the "Plan") in order to reinvest all cash dividends received on common shares of TWC.

By signing this form, I request to be enrolled in the Plan, acknowledge that I have read the Plan, and, if available, the management information circular of TWC (the "Plan Offering Circular") containing and describing the Plan and that my participation in the Plan will be subject to its terms and conditions. I also acknowledge that my enrolment in the Plan will remain in effect until I otherwise notify TSX Trust, in writing, in accordance with the Plan.

PLEASE PRINT CLEARLY – To avoid delays and ensure your enrolment, please complete all fields

First Shareholder Name:		Date of Birth (DD/MM/YYYY):	Occupation:
Second Shareholder Name (if applicable):		Date of Birth (DD/MM/YYYY):	Occupation:
Third Shareholder Name (if applicable):		Date of Birth (DD/MM/YYYY):	Occupation:
Address: (street number and name, apartment number or suite):			
City:	Province:	Postal code:	Daytime Telephone: ()
S.I.N. / T.I.N.:	Shareholder Account Number	Shareholder Email (optional):	

Your Shareholder Account Number is located on your dividend cheque.

Shareholder Signature

Second Shareholder Signature
(if applicable)

Third Shareholder Signature
(if applicable)

Date (DD/MM/YY)

Instructions:

1. **IMPORTANT:** If shares are held by a corporation, partnership, association, agency, estate or trust, this form must be signed by a duly authorized signing officer whose title must be provided. TSX Trust may require submission of satisfactory evidence of authority of the person executing the form.
2. If shares are jointly held, all shareholders must sign this form.
3. Participation in this plan is limited to Canadian residents.
4. If your shares are held in more than one account, a separate enrolment form must be completed for each account that you wish to participate in the Plan.
5. Non-registered beneficial holders (i.e., shareholders who hold their shares through an intermediary, such as a financial institution, broker or other nominee) should consult with that Intermediary to determine the procedure for participation in the Plan.
6. For inquiries, please contact TSX Trust at 1-800-387-0825 or shareholderinquiries@tmx.com.
7. Once completed, please return the form to:

TSX Trust Company
Attention: Dividend Reinvestment Department
P.O. Box 4229, Station A
Toronto, ON M5W 0G1
Fax: 1-888-488-1416

Note:

TSX Trust is soliciting this information in compliance with the Plan and Anti-Money Laundering and Anti-Terrorist Financing legislation. All information will be held in accordance with our Privacy Policy located at <https://www.tsxtrust.com/privacy-policy>.