

OCDC CLASS MEMBER REQUEST FORM

I hereby request that I be added as a class member in the class action for damages for overcrowded, cruel and inhuman treatment or punishment of inmates at the Ottawa-Carleton Detention Centre (OCDC) from May 20, 2014 to June 30, 2016.

Name: _____
(Please print)

D.O.B. (Month/Day/Year): _____

Dates incarcerated at OCDC on pre-trial: _____

Dates incarcerated at OCDC serving a sentence: _____

Dates incarcerated at OCDC on immigration detention: _____

- If you are unsure, approximate dates are fine

During my incarceration (please check all that apply):

- ___ I was subjected to double-bunking
- ___ I was subjected to triple-bunking
- ___ I slept on the floor of a cell
- ___ Family visit was cancelled due to lockdowns
- ___ Lawyer visit was cancelled due to lockdowns
- ___ Medical appointment was cancelled due to lockdowns
- ___ I denied showers and/or hygiene due to lockdowns
- ___ I was subjected to strip searches in front of other inmates

Best Address to Reach Me: (If this is not your current address or you are in jail, please provide contact information of family member or friend with whom you maintain regular contact. By signing this form, you authorize your contact person to share your personal information with Champ & Associates.)

Address _____

Telephone _____

Email: _____

SIGNATURE: _____

DATE: _____