

# Confidence to explore... check

You've put all the plans in place to make your dream trip a reality; and made your well-being a priority by choosing travel insurance. Solutions from Allianz Global Assistance can help by covering costs related to emergency medical care and the cancellation or interruption of your trip, with expert 24/7 emergency care and assistance in the moments you need it most.

**Get familiar with these important aspects of your travel insurance purchase: review this form, check off the boxes, sign the waiver and return to your travel insurance representative.**

I purchased an All-inclusive Plan

I purchased an Emergency Hospital & Medical Plan

## Eligibility

To ensure you qualify to purchase this insurance plan, please read the statements below and check the box at the bottom to confirm you meet the eligibility requirements.

To be eligible for an Emergency Hospital & Medical Plan you must, as of the date you apply for coverage and the effective date:

- a) be a Canadian resident; and
- b)
  - i. be at least 15 days old and no more than 59 years old; or
  - ii. be at least 60 years old but no more than 74 years old and travelling for no more than 60 days; or
  - iii. be at least 60 years old but no more than 74 years old and travelling for 61 days or more and have correctly completed the medical questionnaire; or
  - iv. be at least 75 years old and have correctly completed the medical questionnaire; and
- c) be insured for benefits under a Canadian government health insurance plan during the entire policy period.

In addition to the preceding requirements, if you are:

- i. 60 years old but no more than 74 years old and travelling for 61 days or more, or
- ii. 75 years or over

you must:

- a) not have received treatment for any cancer in the last 3 months (this does not include treatment for basal cell or squamous cell skin cancer, or breast cancer treated only with hormone therapy); or
- b) not have a diagnosed unrepaired aneurysm of 4 centimeters or greater, measured in either length or diameter; or
- c) not require assistance with any of the following as a result of a medical condition or state of health:
  - eating, or
  - bathing, or
  - using the toilet, or
  - changing positions (including getting in and out of a bed or chair), or
  - dressing.

I meet the eligibility requirements for an Emergency Hospital & Medical Plan.

Travel insurance does not cover everything. For complete terms, conditions, limitations and exclusions, please refer to the policy. Travel insurance is underwritten by CUMIS General Insurance Company, a member of the Co-operators group of companies and administered by Allianz Global Assistance, which is a registered business name of AZGA Service Canada Inc.

Allianz Global Assistance does not tolerate any attempt of fraud and considers it a serious offence. Allianz Global Assistance strictly enforces a zero tolerance policy regarding fraud.

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Global Assistance

**To be eligible for an All-inclusive Plan you must, as of the date you apply for coverage and the effective date:**

- a) be a Canadian resident; and
  - b) i. be at least 15 days old and no more than 59 years old; or
    - ii. be at least 60 years old but no more than 74 years old and travelling for no more than 60 days; or
    - iii. be at least 75 years old and travelling for no more than 60 days and have correctly completed the medical questionnaire; and
  - c) be insured for benefits under a Canadian government health insurance plan during the entire policy period.
- In addition to the preceding requirements, if you are 75 years old or over, you must:
- a) not have received treatment for any cancer in the last 3 months (this does not include treatment for basal cell or squamous cell skin cancer, or breast cancer treated only with hormone therapy); or
  - b) not have a diagnosed unrepaired aneurysm of 4 centimeters or greater, measured in either length or diameter; or
  - c) not require assistance with any of the following as a result of a medical condition or state of health:
    - eating, or
    - bathing, or
    - using the toilet, or
    - changing positions (including getting in and out of a bed or chair), or
    - dressing.

I meet the eligibility requirements for an All-inclusive Plan.

## Checklist

### Policy Wording:

I understand the importance of fully reviewing the Policy wording prior to purchasing a policy. This includes (but not limited to) reviewing the Important Notice section, Eligibility, Benefits, and the Exclusions.

I have fully reviewed all of the Exclusions listed, including the Pre-Existing Conditions Exclusion.

I understand that if I have (or the person I am purchasing coverage for has) any pre-existing conditions, I (or the person I am purchasing coverage for) must disclose these to my travel insurance representative prior to purchasing coverage to allow for a clear assessment of the type of coverage that is best suited to protect me (or the person I am purchasing coverage for).

### Multi-trip Plans (if applicable):

I understand that I am purchasing an Annual Multi-trip Plan based on the condition of my health (or the health of the person I am purchasing coverage for) at the time of purchase.

I understand that I must ensure I meet the eligibility requirements of the policy at the time of application and each departure date.

### COVID-19:

I am aware that if, on the effective date of my policy, there is a travel advisory in place for my destination, emergency medical treatment related to COVID-19 **will not** be payable. All other medical treatment is payable subject to the terms and conditions of the policy.

I have been offered a separate COVID-19 Insurance and Assistance Plan to supplement this policy.

I have **accepted** this additional policy.

I have **declined** this additional policy and by doing so I acknowledge that emergency medical treatment related to COVID-19 will not be covered if there is a travel advisory in place at my destination on the effective date of my policy.

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## Waiver

I have been advised that the following travel insurance is available and understand that by signing below, I decline and waive the following insurance coverage(s):

- All-inclusive Plan
- Trip Cancellation & Interruption
- Cancel For Any Reason
- Accidental Death & Dismemberment
- Flight Accident

I acknowledge and accept that any expenses incurred, while not covered by a travel insurance policy, will be my own financial responsibility. My insurance agent/agency has no responsibility for these possible expenses.

I have received a copy of the Policy booklet, a wallet card with the Allianz Global Assistance Emergency Assistance phone number and confirmation of coverage from my travel insurance representative.

Purchaser name \_\_\_\_\_ Policy number \_\_\_\_\_

Purchaser signature \_\_\_\_\_ Date \_\_\_\_\_

Agent name \_\_\_\_\_ Agent signature \_\_\_\_\_ Date \_\_\_\_\_

**Thank you and have a safe trip!**

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