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### Enrollment Form for an Organization

CAIP enrollment form for "In Canada accident/overuse" and "Travel Medical" insurance.

Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Tel: \_\_\_\_\_

Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

(An organization can be a National or Provincial sport organization, Canadian Sport Centre, team, league, club, school, multisport organization, etc).

Responsible Official: \_\_\_\_\_

Tel: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**In Canada Insurance - 12 month enrollment** - Effective Date: \_\_\_\_\_

(Please enclose a list of names and province of provincial medical insurance for each person)

**500 Plus level** - The annual premium is \$35 per person. The minimum requirement for this level is a 500 member enrollment or \$17,500 minimum premium. Please provide a list of names and Province of Provincial Medical Insurance in an Excel spreadsheet.

Level of Insurance	Premium	No. Insured	Provincial Premium Tax	Total
Bronze	\$235	_____	_____	\$ _____
Silver	\$465	_____	_____	\$ _____
Gold	\$795	_____	_____	\$ _____

**Travel Medical Insurance** - Effective Date \_\_\_\_\_ :

IAP 30	\$210	_____	_____	\$ _____
IAP 60	\$350	_____	_____	\$ _____
IAP 90	\$580	_____	_____	\$ _____

**Per trip** - \$5/day subject to a minimum premium of \$35 for trips of 7 days or less.

Date of departure from Canada \_\_\_\_\_ Date of return to Canada \_\_\_\_\_

Insurance Premium Tax applies to the following Provinces:

- Québec: 9%
- Ontario: 8%
- Manitoba: 7%

**Group Annual Plan (GAP)** - Can be arranged for the organization for their respective members. Please contact us for further details.

- We will send an invoice to the organization noted above. The invoice is your evidence of insurance.
- Invoice is payable on receipt by cheque or Interac e-transfer only.

