

Travel Insurance Application for Canadian Travelers

I have ensured my client has met the basic eligibility for Allianz Global Assistance Travel Insurance Products											
My Client is in good health and knows of no reason to seek medical attention. My client is aware that if they											
have any condition affecting their health, claims relation to said condition may be excluded under this policy.											
Step 1: Applicant Information											
Sex		First Name				Last Name			Birth Date (m, d, yyyy)		
M/F											
M/F											
M/F											
M/F											
Address i	n Canada	:									
City & P		Postal C					Code:				
Step 2: Application Details											
Application					Effective Date:						
Destination:						Expiry Date:					
Departure Point:						Days Coverage:					
	Step 3: Coverage Selection										
Emergency Hospital & Medical						USA: Non-USA:					
Multi Trip Plans						Day Plans: 8: 15: 35: 60:					
Time trip time						Basic: Select (0-59 only):					
All Inclusive Package						USA: Non-USA:					
Sum		1									
Suiii	ilisurcu.										
				Step 4:	Payme	ent Information					
Visa: MasterCard: Amex:]	Cash (Agency Bill)						
Card Number						Submit to:					
						Courtney Daye: cdaye@angusmiller.nb.ca					
Expiry:						Emily McManus:					
CVV:						info@angusmiller.nb.ca					