



# ARMSTRONG-McCREADY INC.

640 Lakeshore Drive, Suite 100  
Dorval, Quebec  
H9S 2B6

Tel: (514) 636-5351  
Fax: (514) 636-8268  
E-mail: caip@armstrongmccready.ca  
www.armstrongmccready.ca

Request for enrollment in the Canadian Athlete Insurance Program (CAIP).

**Name of Association:** \_\_\_\_\_

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

**Responsible Official:** Name: \_\_\_\_\_

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

Fax: \_\_\_\_\_

## HOW TO ENROLL IN CAIP

- All enrollments must be submitted through a sport body such as a National or Provincial sport organization, Canadian Sport Centre, Sport Team, league or club.
- Full name of the person to be enrolled - Please no nicknames.
- Province of provincial medical insurance of the person to be enrolled - premium tax may apply.
- Effective date of coverage.
- Level of insurance - Bronze, Silver or Gold

### **In Canada Insurance - 12 Month Enrollment**

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

	BRONZE	SILVER	GOLD	TOTAL
No. Insured	___ X \$65 = ___	___ X \$200 = ___	___ X \$285 = ___	\$
Ont. Premium Tax: 8%	___ X \$5.20 = ___	___ X \$16 = ___	___ X \$22.80 = ___	\$
Que. Premium Tax: 9%	___ X \$5.85 = ___	___ X \$18 = ___	___ X \$25.65 = ___	\$
<b>Effective Date:</b>			TOTAL	\$

### **Out of Canada Enrollment**

(Please enclose a list of names and dates of travel)

- In Canada insurance must be in effect, in order to have Out of Canada insurance.
- Members should carry the membership card for the Travel Assistance program when travelling outside of Canada
- There are 3 options for Out of Canada insurance:
  - **Per trip** - \$30 per week of travel per eligible member. We need the dates of travel before leaving Canada.
  - **Individual Annual Plan (IAP)** - \$180 per year for 30 day IAP.  
- \$300 per year for 60 day IAP.
  - **Group Annual Plan (GAP)** - Can be arranged for the Sport Body for their respective members. Please contact us for further details.
- We will send an invoice to the Association noted above.
- Payment of the invoice must be remitted by the Association and made payable to "Armstrong McCready Inc."

