

# Allianz COVID Coverage Application

## Eligibility:

### Important notes

- are a Canadian Resident;
- are at least 15 days old;
- are insured by a Canadian provincial government health insurance plan for the duration of the trip; and
- have purchased their policy prior to departing on their trip or, if purchasing an extension, before the expiry date of their COVID-19 policy.

Applicant Information				
First Name	Last Name	Gender	DOB (mm/dd/yyyy)	Age
1.		M F		
2.		M F		
3.		M F		
4.		M F		
5.		M F		
Address				
City:		Province:	Postal Code:	
Phone #:		Email:		

Travel Dates		
Departure:	Return:	# of Days:

Destination		
Primary Destination:	Worldwide Including USA:	Worldwide Excluding USA:

Payment			
Card Type:	Mastercard	Visa	AMEX
Name on Card:			
Card #:	Expiry Date:	CVV:	
Signature:			

Declaration	
Signature:	Date (mm/dd/yyyy):

*My electronic signature on this application has the same effect as if I signed it in ink.*

**For more information, please call: Simpson Group Insurance Services Inc.**