

# HOLMAN



INSURANCE BROKERS LTD.

3100 Steeles Ave. East, Suite #101,  
Markham Ontario Canada L3R 8T3

Website: www.holmanins.com  
Telephone: 905-886-5630  
Toll Free: 1-800-567-1279  
Fax: 905-886-5622  
E-mail: service@holmanins.com

**Insurance and  
Risk Management Services provided  
for:**



## Individual Application For Excess Travel Medical/Accident Sickness Insurance For Coverage Outside Your Province Or Outside Canada

Organization's Name: \_\_\_\_\_  
 Contact Persons Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Date of Departure: 

Month	Day	Year
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      Date of Return: 

Month	Day	Year
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Destination: \_\_\_\_\_

Date of Application: \_\_\_\_\_ Signature: \_\_\_\_\_

**PLEASE ATTACH A LIST (SPREADSHEET) OF INDIVIDUALS REQUIRING INSURANCE & THEIR DATES OF BIRTH**

When calculating travel days be sure to include your start and end dates

# of Travel Days \_\_\_\_\_ X # of Travelers \_\_\_\_\_ X Rate \_\_\_\_\_ = Total Premium ➡

Contact your Provincial/Territorial Association for Rates

**Rate Schedule**

Limit of Coverage - \$2,000,000 (Aggregate Payable for One Incident \$2,000,000)

Rate - Per Person, Per Day

Applications to be forwarded to your Provincial Association :

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## SUMMARY OF COVERAGE

### EXCESS TRAVEL MEDICAL INSURANCE

**\$2,000,000 Travel Medical Insurance**

**Hospital Services**

**Doctor's Services**

**Ambulance**

**Dental Accidents**

**Out of Pocket Expenses**

**Trip Interruption**

**Repatriation**

#### **Who Is An Insured?**

Coverage is provided to participants, managers, coaches, trainers, officials & executives.

#### **What Are We Covered For?**

Coverage is provided for emergency medical care in excess of your provincial or territorial plan, due to an **Illness or Accident** while traveling **Outside Your Province or Outside Canada**.

#### **Excess Medical/Hospital Expense - Accident & Sickness**

When as a result of an injury or sickness the Insured requires necessary services of a physician, registered nurse, physiotherapist, hospital, x-ray clinic, laboratory, ambulance or emergency medical return to the outbound point of departure, the Insurer will pay the actual expenses incurred not to exceed the maximum sum stated on the individual certificate. Hospital services shall include all necessary services provided normally by a duly registered and licensed hospital excluding services of a nursing home, rest home or by other non-hospital institutions. Coverage is provided only for expenses incurred by Canadian residents, which are in excess of the benefits available under any Canadian federal or provincial hospital and/or medical plan regardless of whether or not the Insured is enrolled in such a plan.

#### **Blanket Dental Accident Reimbursement**

When an injury to whole or sound teeth including filled or restored teeth requires and receives dental treatment commencing within 30 days of the date of the accident, the insurer shall pay for the necessary expenses for such treatment rendered within 52 weeks of the accident. Payments for all treatment rendered shall be limited to an aggregate of \$5,000.

The following provisions also apply:

- (a) Any payment made under this section shall not exceed the amount specified in the schedule of fees in effect at the time of the accident as published by the dental association of the province in which this policy is issued;
- (b) Capped or crowned teeth shall be deemed as whole or sound teeth;
- (c) No benefit will be payable for expenses of dental treatment incurred for the cost of replacement, adjustment or repair of artificial teeth or dentures (except as otherwise provided herein), any orthodontic treatment, any dental treatment provided solely for cosmetic or esthetic reason

#### **Out of Pocket Expenses**

In the event covered injury or sickness causes an Insured's delay in returning to the point of departure beyond the return date, the Insurer will pay for reasonable out of pocket expenses incurred by the insured up to the per diem amount specified in the individual certificate, not to exceed the maximum applicable benefit for all such expenses.

#### **Trip Interruption**

If, after the outbound departure, the Insured is obliged to leave the tour upon a physician's advice due to covered illness or injury, the Insurer will pay for the cost of one way economy class transportation to rejoin the ongoing tour or to original point of departure.

#### **Repatriation Expense**

In the event of covered death of the Insured, occurring after the originating flight date, the Insurer will pay the cost of the actual expense incurred for conveyance of the body and ashes of the insured person to the outbound point of departure, not to exceed the applicable maximum benefit.