

TERMS & CONDITIONS

All persons insured are subject to the terms and conditions below.

This document does not constitute the entire insurance policy, and the applicant has been advised to read the policy booklet for full details of coverage and exclusions.

- The eligibility requirements for the plan applied for are material to the risk for which insurance is sought. If the applicant(s) does not meet the eligibility requirements for the plan selected, or if there is any misrepresentation or concealment of or failure to disclose any facts which are the subject of the application form, there shall be no insurance coverage provided.
- In the event of a claim that may require or result in hospitalization, call **Claims at TuGo** immediately.
From Canada & USA: 1-800-663-0399
From Mexico: 001-800-514-9976
Collect call worldwide: 604-278-4108
Outside North America and Mexico: 800-663-00399*
*To use this global toll-free service, first dial the international access code for the country you are in, then enter the 11-digit toll-free number as shown above. Service not available in all countries. If you encounter problems using this service, please call us collect 604-278-4108.
- The applicant(s) hereby authorizes any hospital, physician or other person or organization that has records or knowledge of their health or medical history to provide that information to the company (as defined in the policy booklet) and **Claims at TuGo** and the applicant(s) authorizes the company and **Claims at TuGo** to use and disclose that information to determine whether any claim that may be made is covered by this policy or by another plan or policy.
- The applicant(s) is aware that pre-existing conditions (as defined in the policy booklet) are excluded in some circumstances and that further details are provided in the policy booklet.
- The applicant(s) confirms that they know of no reason for which they may seek medical attention.
- The applicant(s) confirms that currently no circumstance is known for which a claim may be made.
- The applicant(s) understand(s) and agree that certain conditions, limitations, and exclusions may apply to the coverage they are purchasing. For complete details, please read the official policy wording.

I, the broker, have informed the applicant(s) who dealt with me when purchasing the policy of the terms and conditions set out above and believe that applicant or those applicants understand them. I have also explained to the applicant(s) who dealt with

me the need to read the policy booklet, discuss the terms and conditions with the other applicant(s) named in the application, and advise the other applicant(s) to contact me if they have any questions. Please note that signing the terms and conditions is optional. You may choose to ask for signatures for your records.

Policyholder's signature

Broker's signature

Validation time AM/PM