



You mean you don't have Student Accident Insurance?

Purchase a Plan Today!

Visit insuremykids.com or call us at 1.800.463.5437

Who is Eligible?

Children are eligible for coverage if they are:

- a) more than 6 months old;
- b) less than 27 years old; and
- c) live in Canada, except the province of Quebec.

If a child is 14 years old or older at any time during the Coverage Period, they must be a full-time student within the 12 months prior to any claim. We define a full-time student as being enrolled in a minimum of 3 courses at the same time, during any 4-month period. If you have children enrolled in different schools or school boards, they may all be insured under one policy.



Protect your loved ones 24/7 with insuremykids®

Get the financial protection your family needs.

If your child is involved in an accident, whether at school or during non-school hours, insuremykids® protects your family from the resulting expenses, which are not normally covered under your government health and group insurance plans.

The Platinum Plan - our best selling plan - only \$33/year

For only \$33.00 a year, the Platinum Plan offers our best value in 24/7 accident insurance coverage. Plus, it is our only plan to offer out-of-province emergency medical coverage (up to \$200,000) plus other travel benefits.



How much of a difference can insuremykids® really make?

Example: A 15 year-old was playing soccer in gym class. The student suffered a knee injury and required medical treatment.

	Platinum Plan	Without insuremykids®
Annual Premium	\$33	\$0
Knee Brace	\$0	\$1,500
Crutches	\$0	\$35
Prescription Medication	\$0	\$36
Physiotherapy	\$0	\$400
Out of Pocket Expenses	\$33	\$1,971

Are you sure your child is covered?

Government health plans and employment plans offer limited coverage.

We help to fill in the gaps.

Three Plans to Choose From! Benefits* Include:

	Platinum Plan	Gold Plan	Silver Plan		
	\$33/year	\$25 /year	\$17 /year		
24 Hours/Day Coverage	✓	✓	✓		
Out-of-Province Emergency Medical & Other Travel Benefits	\$200,000	n/a	n/a		
Total & Permanent Disability**	\$350,000	\$150,000	\$75,000		
Loss of Limb/Loss of Sight, Hearing or Speech**	\$150,000	\$150,000	\$75,000		
Accidental Death	\$30,000	\$20,000	\$15,000		
Unlimited Accidental Dental	10 years	10 years	10 years		
Per Tooth After 10 Years	\$1,650	\$1,400	\$1,250		

*Benefit limits vary based on plan chosen and the insured's age.
**Only one of these two benefits is payable per child in the event
of an accident. For complete descriptions of benefits, benefit
limits, conditions, limitations and exclusions, please view the policy
online at www.insuremykids.com.



3-Year & 5-Year Plans

Save time and money! One quick purchase is all it takes to get multiple years of coverage!

Student Accident Insurance Application Form

Name

(Please print)



Premium Summary

													Plan		Plan	Pl	an
								1 Chil	d				\$33		\$25	\$	17
	You can purchase online, by phone or by mail. To purchase by mail: Complete this application form and mail it,							2 Children					\$66		\$50	\$	34
along with your payment (n			ali it,					3 or m	nore	Chi	ldren		\$91		\$69	\$	47
Old Republic Insurance Company of Canada c/o Insuremykids® Box 557, 100 King Street West								Premiums are one-time single annual rates. For quotes on our 3 and 5 year policies, please call us at 1.800.463.5437.									
Hamilton, ON L8N 3K9 To view our insuremykids* Student Accident Policy, visit www.insuremykids.com. How would you like your policy delivered? By Email By Mail					Automatic Enrollment Option - want to save time and ens protection is in place each year. Select Yes to Automatic located just above the payment section, and add your cr information. Each year your child will be automatically en applicable premium charged to your credit card on the ex (auto-enrollment does not apply to 3 and 5 year plans)								tic Enrollmer credit care enrolled are e expiry da	d nd the			
								Compa comple	any o eted	of Ca	anada	or our		ed repre		Insurance receive yo	our
Name of Student(s) (please print clearly and First Name	list more names on se Last Name	parate sheet if neede		te of Bir	th w	MDD		Plan Type Platinum		old	Silver	Schoo	ol Name & Sc	hool Rosi	rd Name		
Thornamo	Lastriano			te or bir	CII TTIVI	IVIDD			T			School	n Name & Sc	noor boar	iu ivairie		
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Parent/Guardian Name				A	Addres	S											
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Automatic Enrollment Option: 2 ear 1. Select Yes below 2. Provide your credit card inform The premium will be charged to you date. No partial refunds for month Automatic Enrollment Option::	rmation our credit card a												, notify us	anytim	ne before t	he policy e	expiry
TOTAL PREMIUM \$			Credit Card Paym						olicabl	e)			Ма	asterCard	VISA	AVIERICAN EXPRES] 5
Please check off your method of p No cash please. Make all cheques payable to Old		mpany of Canada		Credit (Card N	lumbe	er									Expiry Date	9 MMVV
Credit card payment						Credit Card Number Expiry Date MMYY											

Underwritten by Old Republic Insurance Company of Canada. | Box 557, 100 King Street West, Hamilton, Ontario L8N 3K9 Please visit www.insuremykids.com for detailed information on coverages, conditions, limitations and exclusions. After purchase, if you are not satisfied with the insurance, you may return the policy within 10 days of receipt and receive a full refund.



Signature





Date