



WEEKLY ACCIDENT INDEMNITY (WAI) APPLICATION
 (POLICY EXPIRES JANUARY 1ST EACH YEAR TO COINCIDE
 WITH YOUR MEMBERSHIP)

This exclusive insurance policy provides **income replacement** in the event you are unable to work due to an accident. Coverage is in force 24 hours a day/ 7 days a week and includes (but is not limited to), injuries arising from an equine related incident. The policy will provide **up to \$500.00 / week** in income replacement for **up to 26 weeks** (some restrictions apply). To qualify for this special program and be eligible for benefits, you must meet the following minimum requirements:

1. Be a resident of Canada.
2. Be a member in good standing of your Provincial Equine Association.
3. Be employed full time (minimum of 25 hours a week with a single employer).
4. Be under the age of 75 years old; and
5. Files an income tax return to Canada Revenue Agency in the most recent year.

The combined benefit from this policy and all other benefits available to you (WCB/WSIB/PPP/ Employer Group Programs, etc.) cannot exceed 75% of reported gross income to Canadian Revenue Agency in the most recent taxation year.

YOUR INFORMATION:

Name of Application: _____

Mailing Address: _____
STREET CITY PROVINCE POSTAL CODE

Contact Phone: (_____) _____ Email: _____

Date of Birth (DD/MM/YYYY): _____

EMPLOYMENT INFORMATION:

Your Occupation: _____ Average Number of hours worked **per week**: _____

Employer Name: _____ Employer Phone: _____

FUL TIME with a single employer is required (Minimum 25 hours per week) Yes No (If No, coverage is ineligible)

Did you file an Income Tax Return with Canada Revenue Agency last year? Yes No (If No, coverage is ineligible)

Are you enrolled with WCB / WSIB / Employer Disability Plan? Yes No

Have you ever made a claim for income replacement benefits? Yes No

IMPORTANT: PLEASE READ CAREFULLY BEFORE SIGNING BELOW

I understand and agree:

- 1) The insurance coverage being applied for **PLUS ANY OTHER BENEFITS** I may be eligible to receive if I cannot work – **FROM ALL SOURCES** – will not and cannot exceed 75% of weekly income as reported to Canadian Revenue Agency (CRA) in the last personal income reporting year.
- 2) I understand that there is a waiting period of 7 days before I am eligible to receive any benefits from this policy.
- 3) This policy will pay benefits to a maximum of \$500 / week for a maximum of 26 weeks.
- 4) In the event of a claim, I will be required to sign and remit various documents to prove my loss before any payment is made, including but not limited to a copy of my previous tax return and a consent form to allow the insurer to collect, use and disclose personal information related to my claim.
- 5) I am a member in good standing of my home Provincial Equine Association on the date of this application.

Applicant Signature: _____ **Date Signed:** _____