

Visitor to Canada Cancellation / Refund Request Form

No premium will be refunded if a claim has been reported under this policy.
A \$25 Administration Fee will be applied to all refunds. Refer to policy for full details.

Must be completed in full by Insured OR Sponsor OR selling Agent

Policy No: _____ Named Insured(s): _____

Reason for Request: Early departure on (date) _____
(check one) Obtained Government Health Ins on (date) _____
 Non-arrival or Late Arrival
 Other (please explain below)

Remarks: _____

If you are requesting that we issue this refund retroactively (with a date prior to the date of the request), we require acceptable proof as follows (check one and include documents with request form):

- Early departure - Proof of the date you left Canada (ticket, boarding pass, or copy of passport pages)
- GHIP obtained - Proof of the date your Government Health Insurance took effect (copy of letter or card)
- Non-arrival - Proof that you did not travel to Canada (travel visa denial letter or copy of passport pages)
- Late Arrival – Proof of the date of arrival in Canada (ticket, etc...)

If your premium was paid by credit card, please provide full card details:

Card No: _____ Expiry date: _____ / _____
(must match card used to purchase original coverage) Cardholder Name: _____

Declaration and Signature: By signing below, I hereby declare that there have been no claims made on this policy and that no claim will be submitted.

Name _____ I am the (check one) Insured Sponsor Agent

Signature _____ Date _____

E-mail / Phone # / Fax # _____

(Head Office Use Only)	
Premium has been refunded to Client by:	Claim Check on:
<input type="checkbox"/> Credit card <input type="checkbox"/> Agent <input type="checkbox"/> Cheque from 21 st Century	(date) _____
on (date) _____	
Refund Amount: \$ _____	(\$ _____ less \$25 Admin Fee for early cancellation)

21st Century Travel Insurance Limited

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Form VRR-1009