

Medical Insurance Application



PLBC requires that all foreign students secure medical insurance. Canadian students are covered by their provincial healthcare plan. See enclosed documents for details on coverage. Once a plan is purchased you will receive your coverage package in the mail within 10 days. Your policy number can be communicated the next day (by request to Clint Nelson).

- [] **Fall Semester (September 6 - December 20, 2011)**
105 Days @ \$1.50 = \$157.50
- [] **Fall to Spring Semester (September 6 - April 24, 2012)**
231 Days @ \$1.50 = \$346.50
- [] **Fall to Spring Semester & Missions Trip or Tour (September 6 - June 5, 2012)**
273 Days @ \$1.50 = \$409.50
- [] **Fall to Summer (DPC Students; September 6 - August 31, 2012)**
360 Days @ \$1.50 = \$540.00

I, hereby, agree to pay the above amount and that all information herein is accurate. I have read the coverage details and understand the limitations and processes of this plan provided by AIG through Johnson Fu. Accordingly, I hereby renounce and relinquish all my rights and the rights to make any claim by legal action or otherwise either personally or through third parties on my behalf against Pacific Life Bible College, its directors, officers, employees, agents and/or representatives for any loss or expenses incurred during the above marked coverage. I also agree to indemnify and save harmless the Pacific Life Bible College from any and all debts and liabilities arising from medical expenses or injury and shall keep Pacific Life Bible College indemnified in respect of such debts and liabilities. I acknowledge having read the foregoing, and I understand and agree with the same.

Full Name: _____

Date of Birth: _____

Signature: _____

Date: _____



JF Elite Student Insurance Plan-(AIG) Feature Sheet

Features and Benefits	Maximum Limit
Eligibility	<ul style="list-style-type: none"> International students in a Canadian institution of learning, under age of 69 or parents of students
Waiting period on sickness	<ul style="list-style-type: none"> No
Pre-existing condition coverage	<ul style="list-style-type: none"> Yes, if stable 90 days prior to the effective date of the policy
Travel Worldwide	<ul style="list-style-type: none"> Majority of the period of coverage is spent in Canada except the home country
Maximum liability	<ul style="list-style-type: none"> \$2,000,000
Eligible Medical Expenses	<ul style="list-style-type: none"> Emergency medical treatment for sickness or injury whether in-patient or out-patient Physician/Surgeon/Anesthetic X-Ray and diagnostic laboratory procedures Rental of essential appliances
Hospital accommodation	<ul style="list-style-type: none"> Yes, Semi-private room
Ambulance Services	<ul style="list-style-type: none"> Licensed ambulance and paramedics, including mountain and sea rescue. If ambulance services are not available, taxi expenses reimburse to \$125
Medicines and /or drugs	<ul style="list-style-type: none"> Up to maximum \$10,000 to a limit of a 30-day supply
Private duty nursing (R.N.)	<ul style="list-style-type: none"> Yes, up to maximum of \$12,000
Professional Medical Services	<ul style="list-style-type: none"> Up to maximum of \$600 per practitioner for Physiotherapist, chiropractor, chiropodist, osteopath, podiatrist, speech therapist, acupuncturist (<i>a referral from a physician is required for acupuncturist</i>)
Vaccination and TB testing	<ul style="list-style-type: none"> Up to maximum of \$100 for tuberculosis testing and vaccination or immunization during a 12 consecutive month period, provided the minimum term of insurance purchased is 180 days. Coverage for tuberculosis testing is not payable if testing is mandated by the school board or school as a requirement for program enrolment
Emergency Air Transportation (<i>must be pre-approved and arranged by WTP</i>)	<ul style="list-style-type: none"> Up to maximum of \$1,000,000 per occurrence if you or your eligible insured dependents medical condition requires air transportation to the nearest hospital or to return you to your country of residence
Annual Physician visit	<ul style="list-style-type: none"> Up to \$150 over a 12 consecutive month period for a general check up include one consultation session and prescription of the "morning after pill". (a minimum of 365 days policy must be purchased)
Non-Emergency Treatment (Follow-up)	<ul style="list-style-type: none"> Yes, up to \$3,000 limit per policy for non-emergency medical treatment resulting from the initial emergency
Maternity Benefits	<ul style="list-style-type: none"> Up to \$25,000 for: – Pre-natal care (including but not limited to tests and prescribed medication), involuntary termination of pregnancy or resulting complications provided that the pregnancy commenced during the period of coverage
Impacted Wisdom Teeth I Services	<ul style="list-style-type: none"> Up to maximum \$150 per tooth for the extraction of impacted wisdom teeth when <i>medically necessary</i> performed in a dental or oral surgeon's office
Dental (<i>services of a licensed dentist or dental surgeon for emergency dental treatment</i>)	<ul style="list-style-type: none"> Up to maximum \$4,000 for an accident requiring repair or replacement of sound natural teeth or permanent attach artificial teeth Up to maximum \$600 for dental expenses you incur for dental pain relief other than pain caused by an accident
Repatriation	<ul style="list-style-type: none"> Up to \$15,000 (exclude cost of as burial coffin or urn) Burial/Cremation - up to \$5,000 at place of death (exclude cost of as burial coffin or urn)
Psychiatric / Psychological	<ul style="list-style-type: none"> Up to maximum \$1,000 for out-patient care by a physician, psychiatrist or psychologist Up to \$25,000 for in-patient hospitalization due to psychiatric, psychological, mental or emotional disorders
Acupuncture Treatment	<ul style="list-style-type: none"> Up to maximum of \$600
Family Transportation	<ul style="list-style-type: none"> Up to maximum of \$5,000 for round trip costs for one family member to be with you while you are in hospital if an attending physician considers it necessary and Up to \$1,500 for meals and commercial accommodation
Eye Examination	<ul style="list-style-type: none"> Up to \$100 for one examination (minimum 12 months policy has been purchased).
Prescription glasses, contact lenses and hearing aids	<ul style="list-style-type: none"> Up to maximum of \$200 as a result of an accident
Trauma Counseling	<ul style="list-style-type: none"> Up to 6 sessions (following emergency)
Tutorial expenses	<ul style="list-style-type: none"> Up to \$20/hour to a maximum of \$400 for the costs of a qualified private tutorial service in the event you are hospitalized for 30 consecutive days or more
Automobile return	<ul style="list-style-type: none"> Up to a maximum of \$1,000
Identification Benefit	<ul style="list-style-type: none"> Up to a maximum of \$5,000 for the transportation of an immediate family member and commercial incidental travel expenses up to a maximum of \$250 to identify your body if the eligible insured dependents suffer a covered death and a law enforcement agency requests such identification
Accidental Death & Dismemberment	<ul style="list-style-type: none"> Up to \$100,000 as a result of an accident



Johnson Fu Insurance Agency Inc.

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The Medical Network Provider List

03 Jun 2010

1. **Stein Medical Clinic**
Bentall 5
188 – 550 Burrard Street
Vancouver, BC
V6C 2B5
Tel: 604-688-5924
(English, German, French, Spanish, Greek, Hindi)

2. **Ultimate Medicentre**
Plaza Level Bentall 4
Box 49324
1055 Dunsmiur Street
Vancouver, BC
V7X 1L4
Tel: 604-683-8138

3. **Abbotsford Village Medical Clinic**
#302 – 2050 Sumas Way
Abbotsford, BC
V2S 2C7
Tel: 604-504-7145

Head Office: 15 Wertheim Court, Suite 501, Richmond Hill, Ontario L4B 3H7

Phone: 905-707-1511 Fax: 905-707-1513 Toll free: 1-877-832-5541

www.jfuinsurance.com