



APPLICATION FOR PROFESSIONAL LIABILITY INSURANCE FOR FOREIGN STUDENTS

Name of Applicant:

Address:

City:

Prov./Terr.:

Postal Code:

Telephone:

Email:

Placement Information

Name of Placement (Clinic, hospital, etc.):

Placement Mailing Address:

City:

Prov./Terr.:

Postal Code:

Telephone:

Email:

Name of Licensed Supervisor

Duration of stay in Canada:

Start Date:

Completion Date:

Will you be providing services at more than one placement location? If yes, please provide location address and placement dates below:

Yes No

Will the duration of your placement have a maximum duration of 33 weeks?

Yes No

Will your work be performed under supervision?

Yes No

Are you authorized to study in Canada for the duration of the course by immigration Canada and the Canadian Physiotherapy Association?

Yes No

Requirements for Professional Liability Insurance

In order to obtain professional liability insurance while on placement in Canada, the following requirements must be sent to our office:

1. A letter from the university or education facility stating that you are a student in good standing and are prepared to complete this placement.
2. A letter from the placement confirming your employment and stating the length of time you will be working there.
3. Maximum duration is 33 weeks.
4. Work must be performed under supervision.
5. Must be authorized to work in Canada for the duration of the course by Immigration Canada.
6. Please indicate the limit of liability required:

\$1,000,000 per claim
\$1,000,000 aggregate
\$382 Premium

\$2,000,000 per claim
\$2,000,000 aggregate
\$442 Premium

\$3,000,000 per claim
\$3,000,000 aggregate
\$508 Premium

\$5,000,000 per claim
\$5,000,000 aggregate
\$569 Premium

Legal Services Package

Specialized legal helpline for personal and/or business matters is just a phone call away.

For \$30/year - CPA members have access to:

Unlimited Telephone Legal Helpline

Unlimited access to a confidential 24/7 toll-free line to speak with a lawyer about any legal issue, both personal and professional. Upon calling, you will be connected with a lawyer who is geographically close to you and who is an expert in the area of law you are calling about.

150+ Legal Documents and templates online, anytime you need them

Take advantage of an online library of customizable templates and up-to-date legal documents that have been drafted by lawyers. The document library includes employment contracts, partnership agreements, loan agreements, promissory notes, and more.

Legal Document Reviews

Lawyers will review your short legal documents (e.g. contracts) or legal letters and can draft simple legal letters on your behalf.

Would you like to purchase the Legal Services Package?

Yes No

Declarations and Warranty

The undersigned declares:

I declare that during the last five years no insurer has cancelled, declined or refused to issue me/us any form of liability insurance and that this application discloses the hazards known to exist at the date of this application. I declare that the statements made herein are in every respect true and correct and hereby apply for a contract of insurance to be based upon the truth of the said statements.

Submitting this form does not bind the Applicant or company to complete the insurance but is agreed that this form shall be the basis of the contract should a policy be issued.

The insurance premium is fully retained and not refundable.

I declare that I am a member in good standing with The Canadian Physiotherapy Association. If it is determined that I do not hold an active membership, I understand that my insurance policy is null and void.

Signed by:

Position:

Date:

Payment Information

The following provinces are subject to provincial sales tax:

Ontario residents add 8% sales tax
Québec residents add 9% sales tax
Manitoba residents add 7% sales tax
Newfoundland residents add 15% sales tax
Saskatchewan residents add 6% sales tax

Sub-total	\$
Tax	\$
Total Enclosed	\$

All other provinces are exempt.
GST is not applicable to insurance premiums.

All cheques payable to BMS Canada Risk Services Ltd, or complete credit card authorization below.

Authorization for Credit Card Charge

VISA, AMEX or M/C Account No:

Expiry Date:

CVV:

Cardholder Name:

Signature:

BMS Canada Risk Services Ltd. (BMS)

825 Exhibition Way, Suite 209
Ottawa, ON K1S 5J3

Toll Free: 1-855-318-6136

Fax: 613-701-4234

Email: cpa.insurance@bmsgroup.com