



# PACIFIC BLUE CROSS Travel Plan

## Optional Pre-Existing Condition Coverage:

In order to be eligible for Pre-Existing Condition Coverage, please answer the following questions.

For you or any other applicants in your party (i.e. for anyone to be insured under the same travel insurance policy):

	Yes	No
1. Has anyone been diagnosed with a terminal condition?		
2. Does anyone have kidney failure under dialysis?		
3. Does anyone have a lung condition with oxygen or cortisone therapy?		
4. Does anyone have cancer with metastasis?		

Note: Any incomplete, erroneous or inaccurate statement shall render the travel insurance contract **NULL AND VOID** in its entirety.

\_\_\_\_\_ X \_\_\_\_\_  
Primary Applicant Name (PRINT) Primary Applicant Signature Date Signed

**IMPORTANT:** The information you submit will determine your coverage and rate eligibility. Please inform your agent if a health problem arises prior to your departure and ask him/her to proceed with a new evaluation before leaving the Province, otherwise your pre-existing medical condition(s) may not be covered.