



185 The West Mall, Suite 610  
Etobicoke, Ontario M9C 5P1

## WELCOME



**Client experience centre**  
Contact us Monday to Friday,  
8 a.m. to 5 p.m.  
<1-800-000-0000>



**Blue Advantage®**  
Save on various health  
and wellness services.  
[blueadvantage.ca](http://blueadvantage.ca)



**<Assistance Program**  
Free assistance services  
to better support you.  
1-800-000-0000  
[on.bluecross.ca/assistance-program](http://on.bluecross.ca/assistance-program)>

Your contract number: <Contract number>

<First Name> <Last Name>  
<Address>  
<City>, <Province>  
<Postal code>



**<Travel assistance**  
Benefit from immediate assistance abroad, 24/7.  
From Canada or the US (toll-free): 1-800-361-6080  
Everywhere else (reverse charges): 514-286-8411>

Re: Your insurance policy

Dear <Jean>,

We are pleased to send you your new insurance policy. Please read it carefully and contact us should any personal information be incorrect.

You have <10> days to cancel this policy if it doesn't fit your needs and receive a refund for the premium already paid.

The insurance product you have purchased comes with exclusive benefits, such as <the travel assistance service>, the <Assistance Program> and the Blue Advantage discount program.

For any questions, please do not hesitate to contact us or your advisor.

Thank you for choosing Ontario Blue Cross® for your insurance needs.

Contract Administration Team  
Individual Insurance

<Name of agency or advisor>  
<Advisor's code>

BCLBVA (03-2020)



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## MODIFICATION

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Re: Policy changes

Dear <Jean>,

Please find enclosed your insurance policy, reflecting the changes you recently requested.

The insurance product you have purchased comes with exclusive benefits, such as <the travel assistance service>, the <Assistance Program> and the Blue Advantage discount program.

For any questions, please do not hesitate to contact us or your advisor.

Thank you for choosing Ontario Blue Cross® for your insurance needs.

Contract Administration Team  
Individual Insurance

<Name of agency or advisor>  
<Advisor's code>

BCLMDA (03-2020)



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DUPLICATE



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Your contract number: <Contract number>

<First Name> <Last Name>  
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Everywhere else (reverse charges): 514-286-8411>

Re: Copy of your insurance policy

Dear <Jean>,

As per your recent request, we are pleased to send you a duplicate copy of your insurance policy.

The insurance product you have purchased comes with exclusive benefits, such as <the travel assistance service>, the <Assistance Program> and the Blue Advantage discount program.

For any questions, please do not hesitate to contact us or your advisor.

Thank you for choosing Ontario Blue Cross® for your insurance needs.

Contract Administration Team  
Individual Insurance

<Name of agency or advisor>  
<Advisor's code>

BCLRIA (03-2020)

Your life is our lifework.