

Kinectrics Inc.

Health & Dental Enrollment - Over Age Dependent

Canada Life Policy Number: 51597



Action Required—Pharmacist and Dentist

Please note that in addition to completing this form, it is necessary to have your pharmacist and dentist update your child’s status in their system to be a “Student” and not “Child”. Failure to make this change will result in claim denial.

Employee/Pensioner Information

Employee Number

Coverage Category
(S- single, F- family)

Employee Last Name

First Name

Initial

Apt No.

Street Address

City

Province

Postal Code

Gender
(M or F)

Date of Birth
(month/day/year)

Marital Status

☐ Single

☐ Married

☐ Common-Law

☐ Divorced

☐ Widowed

☐ Legally Separated

Dependent Child Information

Child’s Last Name

First Name

Initial

Gender
(M or F)

Child’s Date of Birth
(month/day/year)

Age

Relationship to Employee
S–Son D–Daughter O–Other

Full-Time Student
Y or N

Disabled Dependent
Y of N

Name and Address of School

Child’s Last Name

First Name

Initial

Gender
(M or F)

Child’s Date of Birth
(month/day/year)

Age

Relationship to Employee
S–Son D–Daughter O–Other

Full-Time Student
Y or N

Disabled Dependent
Y of N

Name and Address of School

Certification

I hereby certify that the information contained is accurate. I acknowledge that any deliberate falsification may result in the re-payment of more money received for ineligible claims, legal action, and for employee’s disciplinary action up to and including termination of employment. I also acknowledge approval that Canada Life may cross reference medication to ensure drugs purchased by individuals covered under Kinectrics Inc.’s Plan from different pharmacies, are compatible, and understand that this information will be treated as confidential by Canada Life.

Employee/Pensioner Signature

Date

Eligible Dependents

Eligible Children

To be eligible for continued coverage after their 19th birthday, dependent children must be:

- unmarried **AND** unemployed **AND** attending school full-time up to and including 23 years of age.

Coverage ceases as of the child's 24th birthday or if any of the other above criteria are not satisfied.

Children includes:

- any child of the employee/pensioner or their spouse and legally adopted children.
- a child of any age who is dependent for financial support upon the employee/pensioner or the Employee's/Pensioner's spouse because of physical or mental infirmity, provided infirmity commenced while the individual otherwise met the definition of an eligible child as outlined above.

Note: *It is the responsibility of the employee/pensioner to notify the Kinectrics HR Department of any addition or deletions when a dependent no longer meets the eligibility criteria, or when spousal coverage under another benefits plan changes.*