



APPLICATION FOR PROFESSIONAL LIABILITY AND COMMERCIAL GENERAL INSURANCE PROGRAM

This insurance program, exclusive to CAHNPro Members insures members for services provided as professionals in Holistic Nutrition.

*If you have any questions relating to the coverage offered by this policy please contact BMS at **1-855-318-6558**.*

Name of Applicant:

Business/Corporation Name:

Address:

City:

Prov./Terr.:

Postal Code:

Telephone:

Email:

1. Are you a member in good standing with the CAHNPro? Yes No
Membership Number:

2. Relevant Qualifications (Certificates, Accreditations): Yes No

3. Has any application for professional liability and / or commercial general liability insurance ever been denied or cancelled? Yes No
If yes, please provide details.

4. Have you ever sustained a professional liability and / or commercial general liability loss or has such a claim been made against you? Yes No
If yes, please provide details.

5. Have you any knowledge of any negligent act, error or omission or breach of duty which might give rise to a claim against you? Yes No
If yes, please provide details.

Combined Professional Liability and General Liability

	Limit	Cost	Option Selected
Option 1	\$1,000,000 per claim / \$2,000,000 aggregate Professional Liability (Claims Made Form) \$1,000,000 per claim / \$2,000,000 aggregate General Liability (Occurrence Form)	\$161	<input type="checkbox"/>
Option 2	\$2,000,000 per claim / \$4,000,000 aggregate Professional Liability (Claims Made Form) \$2,000,000 per claim / \$4,000,000 aggregate General Liability (Occurrence Form)	\$198	<input type="checkbox"/>

The commercial general liability under this section provides coverage for third party bodily injury and property damage only. This coverage is sufficient if you are providing the occasional class or workshop.

Commercial General Liability

	Limit	Cost	Option Selected
Option 1	\$1,000,000 per claim / \$1,000,000 aggregate Commercial General Liability (Occurrence Form)	\$102	<input type="checkbox"/>
Option 2	\$2,000,000 per claim / \$2,000,000 aggregate Commercial General Liability (Occurrence Form)	\$155	<input type="checkbox"/>

The commercial general liability provided separately offers Tenant's legal liability, personal and advertising liability, damage to hired automobiles and non-owned automobile coverage in addition to the third party bodily injury and property damage. This coverage is recommended if you lease a space. Additional contents coverage may also be required.

Declarations and Warranty

I declare that during the last five years no insurer has cancelled, declined or refused to issue me/us any form of 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.

If you are unsure of your coverage requirements please contact BMS, a licensed insurance broker will be available to answer your questions during regular business hours.

Signed by:

Position:

Date:

Signing of this form does not bind the Applicant or company to complete the insurance but it 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.

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 Group)

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

Toll Free: 1-855-318-6558

Fax: 613-701-4234

Email: cahnpro@bmsgroup.com