



GROUP WAIVER OF PREMIUM CHECKLIST

Please return this completed form and supporting documents to:

Group Benefit Services
400-200 Main Street, Winnipeg, MB R3C 1A8
For inquiries, please call 1-800-665-7076

Claim Checklist

To ensure the assessment of your Group Waiver of Premium benefit is completed as quickly as possible, please review the following items and verify they have all been included.

- Waiver of Premium Plan Sponsor Statement Form - completed and signed by Plan Sponsor
- Waiver of Premium Plan Member Statement Form - completed and signed by you
- Authorizations and Declarations Form - signed by you
- Waiver of Premium Physician Statement Form - completed and signed by physician