

# GROUP INSURANCE QUOTATION

The cost of the Retail Council of Canada group insurance program depends on the type of benefits selected, and the age, classification and family status of each employee. Contact Morneau Sobeco for a quotation...



## BY PHONE

Call Morneau Sobeco toll free:

**1-800-267-0097**

Please complete the following form, and provide this information to the Morneau consultant on the phone.



## BY FAX

Please complete the following form and fax a copy to:

**(416) 383-0382**

Our fax line is open on a 24-hour basis.



## BY MAIL

Please complete the following form and mail a copy to:

**Morneau Sobeco  
VIP Division  
1500 Don Mills Road  
Suite 500  
Toronto, ON M3B 3K4**

Company Name \_\_\_\_\_

Full Address \_\_\_\_\_

City & Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Your Name \_\_\_\_\_ Title \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

e-mail: \_\_\_\_\_

**Please provide information about yourself and all eligible staff to be insured.**

	Name	Date of Birth (mm/yy)	Smoker or Non-smoker (S,N) *	Single or Family (S,F)	Classification	
					A -Owner/managers	B -All other staff
1.	_____	_____	_____	_____	<input type="checkbox"/> A	<input type="checkbox"/> B
2.	_____	_____	_____	_____	<input type="checkbox"/> A	<input type="checkbox"/> B
3.	_____	_____	_____	_____	<input type="checkbox"/> A	<input type="checkbox"/> B
4.	_____	_____	_____	_____	<input type="checkbox"/> A	<input type="checkbox"/> B
5.	_____	_____	_____	_____	<input type="checkbox"/> A	<input type="checkbox"/> B
6.	_____	_____	_____	_____	<input type="checkbox"/> A	<input type="checkbox"/> B

(If you have more than 6 employees, please continue on a separate sheet)

**\* A non-smoker discount is available for employees who have not smoked/used tobacco products in the past 12 months.**

**Do you already have a group insurance plan?**  Yes  No

If yes, a Morneau Sobeco consultant will be able to provide you with a comparison of cost and benefit features for your review. Please forward to Morneau Sobeco: (1) a copy of your current employee booklet or insurance policy; and (2) a copy of your most recent billing statement.

**Group insurance quotations are normally mailed within 48-hours of receipt of the above information. You will receive a full description of the program, and all material needed to join. We look forward to the opportunity to be of service.**