



**TRAVELANCE**

YOUR PEACE OF MIND, OUR PROMISE

(DISTRIBUTOR)

## Claims Information

### To report a claim:

Return the required documentation detailed below, along with your original, signed, claim form to:

**Old Republic Insurance Company of Canada**  
Box 557, 100 King Street West  
Hamilton, Ontario L8N 3K9

## Student Accident Claims

1. Complete page 1 of the claim form. If the insured child is a minor, this form should be completed and signed by a parent or guardian.

- **For non-dental claims:** please have the Physician complete the Attending Physician's Statement on the second page of this form.
- **For dental claims:** please have the Dentist complete the Dental Claim form on the third page of this form.
- The company must be notified within 60 days of the date of the accident and proof of claim, including a report from the attending Doctor or Dentist, must be submitted within 90 days of the date of the accident.

2. Original medical bills or dental receipts.

3. A copy of any other insurance company's Explanation of Benefits (EOB) if the expenses have been submitted elsewhere.

4. A copy of a Physician's referral for medical services or supplies being claimed.

*We reserve the right to request submission of the original receipts if deemed necessary to complete the assessment of your claim.*