



## **Student Claims Procedures**

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### **For DEATH and DISMEMBERMENT Claims**

***Advise in writing as soon as possible:***

- Name of Insured Student.
- Date of Birth
- Date of Accident
- Date of Loss
- Name and Address of Person to who claim forms should be sent.
- Type of Loss
- Cause of Loss
- Submit the above to our claims office in Montreal at:

AXA Assurances Inc.  
2020 University Street, Suite 700  
Montreal, P.Q., H3A 2A5  
Telephone: 1-800-561-7251 Ext. 4472  
Fax: 1-866-582-6672

### **For MEDICAL, DENTAL or MISCELLANEOUS Claims**

- Complete the Proof of Loss form in its entirety.
- Have the "Attending Physician's Statement" section of the Proof of Loss form completed by the Attending Physician.
- If claim is for dental expenses, complete the Accidental Dental Claim form as well as the Proof of Loss form.
- Include school declaration form confirming that the claimant was a student at the school.
- Include "Consent to collect, use and disclose personal information" form for all claims.
- If claiming for medical and / or dental expenses, submit original receipt or original invoice. Claims will not be paid based on photocopies.
- Submit all of the above to our claims office in Montreal at:

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