

Participant Accident:

For Each Separate Accident the Plan Pays:

Sport Accident Coverage Form	
Principal Amount:	CAD \$50,000
Fracture Indemnity Amount:	CAD \$1,500
Dental Accident Reimbursement	CAD \$10,000
Dentures, Removable Teeth, Hearing Aids, Eyeglasses and Contact Lenses	CAD \$500
Emergency Transportation – any one Insured Person	CAD \$100
Family Transportation – any one Insured Person	CAD \$2,500
Medical Expense Reimbursement – any one Insured Person	CAD \$15,000
Prosthetic Appliances – any one Insured	CAD \$3,000
Rehabilitation – any one Insured Person	CAD \$3,000
Repatriation – any one Insured Person	CAD \$5,000
Tuition Benefit – any one Insured Person	CAD \$2,000
Aggregate Limit Payable for any one Accident	CAD \$1,000,000
Weekly Income – Waiting Period – 14 Days	CAD \$100