

You have 10 days from when you receive the insurer's letter of approval to cancel your enrollment in Health Track Insurance® and get a full premium refund. You must complete and return this form to the insurer by the previously mentioned deadline. After the deadline, you may end your enrollment at any time, but no premiums will be refunded for the period prior to your request.

NOTICE OF CANCELLATION

To: DESJARDINS INSURANCE

Date: _____ (date you're sending this notice)

I hereby cancel my enrollment in Health Track Insurance.

Member's name: _____

Contract number: **E888** _____

Certificate number: _____

Signed at: _____ **Member's signature:** _____

**Please send the original to Desjardins Insurance, C. P. 3000, Lévis (Québec) G6V 9X8
and keep a copy for your records.**