



Premium LIABILITY INSURANCE POLICY
FOR THE ASSOCIATION OF NEW BRUNSWICK
MASSAGE THERAPISTS

APPLICANT INFORMATION:

Applicant Name: _____

Mailing Address: _____

City: _____

Province: _____

Postal Code: _____

Phone: _____

Cell: _____

Email: _____

POLICY INCLUDES:

Included in this annual policy is the following:

- **\$5,000,000 Professional Liability**
Which is any claim brought forth through your actions or non-actions for example: you cause injury to a third party during the course of your professional service.
- **\$5,000,000 General Liability**
Which is any claim brought forth by bodily injury or property damage you cause to a third party, and for situations that are not in your control. For example if someone were to slip and fall coming to your appointment.
- **\$500,000 Tenants Legal Liability**
Damage you may cause to premises you rent or occupy. This insurance applies to property damage caused by fire, explosion, smoke or leakage from fire protective equipment to the rented premise. It does not cover your equipment.
- **\$25,000 Legal Expense Coverage**
Must be reported within 60 days of notification of any allegation against you.
- **\$10,000 Criminal Defense Cost Reimbursement**
Applies to allegations of sexual, physical, or verbal abuse. This coverage will reimburse you for legal expenses in the defense of an allegation, provided you plead not guilty and are found not guilty.
- **\$10,000 Personal Protection Package**
Provides you with a basket of coverage's including: business equipment, business interruption, glass, property in transit to name a few.
- **Legal Guard**
24/7 Telephone access to legal information service for questions relating to your business.

This policy is an **OCCURRENCE BASED FORM** which means claims are covered when they occur during the policy term, regardless of when they are reported. For example if you stop paying for an occurrence based policy when you stop practicing, you will still have coverage for when you were practicing, no matter when the actual claim is reported.

This policy allows up to \$25,000 in **PRODUCT SALES**. Products must relate to your modality, they cannot be self manufactured, tampered with, nor relabeled. Products can only be sold to existing clients.

ADDITIONAL MODALITIES:

We can insure more than 365 modalities, however your policy only insures you for the modalities listed on it.
If you practice other modalities you must advise us, so we can determine whether or not it can be included on this policy.
Please note some modalities are subject to additional premiums.

Please list all of your modalities:

If you practice Esthetics, you must list all the services you provide under this modality.

ADDITIONAL MODALITIES:

Do you practice Acupuncture?

If you wish to have Acupuncture added to this policy, the additional premium is \$200.00

Yes No

Do you practice Osteopathy?

If you wish to have Osteopathy added to this policy, the additional premium is \$300.00

Yes No

PRODUCT SALES:

Do you sell any products?

If 'yes', please explain, and please note you can only sell a maximum of \$25,000 of products in any one calendar year:

Yes No

Do you manufacture any products?

If 'yes', please explain:

This policy only provides coverage of up to \$10,000 in contents and \$25,000 in gross annual product sales.

COVERAGE LIMITS:

This **INDIVIDUAL LIABILITY POLICY** is designed to cover you as an individual practitioner and is not intended to cover Employees, Sub-Contractors, Business Partners or a Commercial Office space you may be renting over 200 SQFT. The Insurance limits of this individual policy, is not sufficient for business practices that fall outside these parameters.

If your practice falls outside these parameters please contact us at the Group department so we can provide you with the proper coverage, please indicate you're a member of the ANBMT association:

Call us at 1-877-768-2262 or email info@ineedapolicy.com