

Return by Fax or Email to:
DC Group Benefits Brokers
Fax to 1-877-817-9242 or email:
carollee@dcbenefits.ca

Company Name:

Contact Person:

Day Phone:

Company Address

No. Year(s) in Business

Employee Name	Sex M/F	Date of Birth	Monthly Salary	Hours Worked Per Week	Coverage Type	Occupation	Date Hired	Prov. Of Res.

DC Benefits
Office: 604-465-1932
Cell: 604-551-8592
Fax: 1-877-817-9242

*We Broker
You Save!!*

Coverage Code
S= Single
F= Family
W=Employee on Spouses Plan