

The information on this form is being collected and used by Alberta Health pursuant to sections 20(a) and (b) of the *Health Information Act* and section 33(c) of the *Freedom of Information and Protection of Privacy Act* for the purpose of determining your and your dependant's eligibility to receive coverage under the Alberta Health Care Insurance Plan. If you have any questions regarding the collection and usage of this information, please contact an Alberta Health representative toll-free within Alberta at 310-0000 then 780-427-1432.

Registrant Information

Last Name (Proof of identity required. See page 2.)		First Name	Middle Name	PHN (Office Use Only)
Date of Birth	YearMonthDay	Gender	Marital Status (additional info)	Number of Dependants (additional info)
Current Mailing Address (Proof of residency required. See page 2.)		City/Town	Province	Postal Code
Legal Land Description or Physical Address (if providing a PO Box, RR or site address)			Home Phone (10 digits, no spaces or dashes)	

Complete all Sections

A

Are you a Canadian Citizen? (Check one) (Proof of Canadian citizenship or legal entitlement to be in Canada required. See page 2.)

Canadian Citizen Yes No

If No Permanent Resident Study / Work / Visitor Permit Date Permit Signed (yyyy/mmm/dd)

Other Permit Valid Until (yyyy/mmm/dd)

B

Have you previously had Alberta Health Care Insurance Plan coverage?

No

Yes → Provide your previous Alberta Personal Health Number (if known)

Name you were previously registered under (if different from above)

C

Why are you applying for Alberta Health Care Insurance Plan coverage?

New to Alberta Full-time student from another province/territory

Returning Alberta Resident Temporary/Contract worker from another province/territory

No longer on Spouse's or Parent's AHCIP coverage (go to E) Released from coverage with a Canadian Federal Health Plan

Other Date of release (yyyy/mmm/dd)

D

From where, and when, did you arrive in Alberta?

Where did you arrive from? (Country/Province/Territory)

Date you arrived in Canada, if arrived from outside Canada (yyyy/mmm/dd)

Date you arrived in Alberta (yyyy/mmm/dd)

Previous Canadian provincial/territorial health number / medical plan number (if known)

E

Do you intend to stay in Alberta for 12 months or longer?

Yes

No → Please explain why and state how long your stay will be

Registrant Declaration

I certify that:

- I and any dependants listed are physically present in Alberta for at least 183 days in a 12-month period as defined on the information page of this application. (See page 2.)
- All the information on this application is true and correct, and I authorize the Minister of Health to verify this information with immigration authorities, agencies and other persons as appropriate.

I acknowledge that:

- It is an offence to knowingly provide false information in relation to this application.
- My application cannot be processed until I have attached the required documents to prove my identity, legal entitlement to be in Canada, and Alberta residency. (See page 2.)
- If there is a change in my name, address, marital status or citizenship status, I will notify Alberta Health within 30 days.

Registrant Signature		Date	Daytime Phone
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Incomplete or unsigned forms will be returned. Forms will not be processed without documentation. (See page 2.)

Office Use Only				
P#	Initials	Card Requested	Document type viewed - Registrant	
		Yes No	Identity	Legal Entitlement
				Residency

IMPORTANT INFORMATION

All residents of Alberta must register themselves and their dependants with the Alberta Health Care Insurance Plan.  
**Note:** Individuals cannot maintain active health coverage in more than one province/territory. For example, out-of-province students or temporary/contract workers should maintain their coverage in their home province unless moving to Alberta permanently.  
**Alberta Resident**  
A person lawfully entitled to be or to remain in Canada, who makes Alberta his/her home and is physically present in Alberta for at least 183 days in a 12-month period, but does not include a tourist, transient or visitor.

Marital Status/Dependant

- Spouses must register together, unless separated or spouse does not intend to become an Alberta resident (as defined above)
- Adult interdependent partner (partner) - may register together or separately
- Single children:
  - under 21 and wholly dependent (includes adopted children, foster children and legal wards)
  - 21 and over and wholly dependent because of physical or mental disabilities
  - under 25 and enrolled in three or more courses at an accredited educational institution

Effective Dates

If the application is received within 90 days of arrival in Alberta

- from within Canada, the effective date of coverage is first day of the 3rd month (example: arrive January 10 - effective April 1)
- from out-of-country, the effective date of coverage is either the date of arrival to Alberta or the date on the Canada entry document, whichever is later

Required Documentation - for registrant and spouse/partner

If a document from each category below (one must include a photo) is not submitted, the application will not be processed and will be returned.  
**Please note: Individuals with visitor or short term permits or refugee documents may not be eligible for coverage.**

1) Identity - ONE (1) document from BOTH the registrant and spouse/partner to support your identity and name. Document must be government issued ID which shows photo, name and birthdate. Examples include:

Registrant Spouse/Partner

and

- Canadian/Non-Canadian passport
- Canadian citizenship card
- Permanent resident card
- Federal identification card
- Current Alberta/provincial/territorial driver's licence

2) Citizenship/Legal entitlement to be or remain in Canada - ONE (1) document from BOTH the registrant and spouse/partner to support your Canadian citizenship or legal entitlement to be or remain in Canada. Document must be ID which shows name and birthdate. Note: Non-Canadian dependents (if applicable) must also provide a document. Examples include:

Registrant Spouse/Partner Dependants (if applicable)

and and

- Canadian passport
- Canadian citizenship card
- Canadian birth certificate
- Permanent resident card
- Canada entry document (work/study/visitor permit)

3) Alberta residency - ONE (1) document from EITHER the registrant or spouse/partner to support your Alberta residency. Document must show name and current Alberta address (same as provided on the application). Examples include:

Registrant Spouse/Partner

or

- Current Alberta driver's licence
- Current Alberta photo ID card
- Current utility bill for an Alberta residence
- Mortgage or rent/lease agreement

**Original documents are required when applying in person.** Photocopies of documents are only acceptable if not applying in person. Photocopies must include front and back of the document, if applicable. Do not send original documents by mail as we cannot guarantee their safe return.

Apply for coverage in person at a Registry Agent office or by mail. Additional information on the Alberta Health Care Insurance Plan is available on the website.

<b>Mailing Address</b> Alberta Health PO Box 1360 Stn Main Edmonton AB T5J 2N3	<b>In Person at a Registry Agent Office</b> To locate the office nearest you, please telephone our office or visit our website. <b>Website</b> www.health.alberta.ca	<b>Telephone</b> 780-427-1432 Edmonton Toll-free within Alberta at 310-0000 then 780-427-1432
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