

# DR. ADAM STEWART

52 St. Lawrence St. E., Main Floor, Madoc, ON, K0K 3E0

## PS365 ANNUAL FEE PLAN REGISTRATION FORM – CHEQUE PAYMENT ONLY

Complete and return this form with your cheque payment. Contact PatientSERV, our plan administrator, at **1-800-385-3210** if you have questions or require assistance.

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### Tell Us Who You're Registering

Include everyone in your household you want to register that is a patient of Dr. Adam Stewart.

First Name	Last Name	Health Card Number
Phone Number	Email Address	

#### Your Family Members

First Name	Last Name	Health Card Number	Email Address
First Name	Last Name	Health Card Number	Email Address
First Name	Last Name	Health Card Number	Email Address

For additional family members, use another page or back of registration form.

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### Choose a plan

See the Uninsured Services Fee Guide for a list of our current fees.

#### PS365 Annual Fee Plan

Includes 12 months of coverage from the date you register.

- ☐ Individual - \$146.90  
☐ Couple - \$220.35  
☐ Family - \$254.25

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### Method of Payment

☐ Cheque

Please make your cheque payable to PatientSERV.

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### Sign here

By signing below, you confirm that you have read the information we have given you about uninsured services and you agree to the terms of the payment plan you've chosen (*PS365 Annual Plan*).

Signature	Date
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### Send us your completed form

Mail to:  
PatientSERV  
3280 Bloor Street West, Suite 1140  
Toronto, ON M8X 2X3