



Accident Claim Procedure

- 1) Complete "Alberta Basketball Association Incident Report"
 - a. Print the [Accident Claim Form](#)
 - b. Page 1 – to be completed by the coach or league representative
 - c. Page 2 – to be completed by participant's parent/guardian

- 2) Include the following:
 - a. current physician, hospital, or other provider's bills for accident medical expenses being claimed.
 - b. Provincial Health Care and/or Private Health Care providers "explanation of benefits" showing their payments & denials
 - c. All the above must include the patient's name, condition (diagnosis), type of treatment given, date the expense was incurred and the charges made.

- 3) Submit the above information to:
 - **E-mail:** info@allsportinsurance.com
 - **Mail:**
507-1367 West Broadway
Vancouver, BC V6H 4A7
 - **Phone:** 1 877 992-2288