

12. Requesting Alberta Health and Wellness Forms (Revised)

You may obtain the forms mentioned in this handbook through several different methods:

1. You can view catalogues and order forms on-line. Orders are filled within one working day. This method is recommended when quantities of 10 or more of several different forms are required. To order on-line:
 - Go to the Alberta Corporate Service Centre website at www.dbf.com/Mktg/acsc/index.asp and click the “To Register, Click Here” button (upper left corner).
 - Fill in the requested information and click “Submit”.
 - Once your request has been processed, an e-mail will be sent to you with your login ID, password, and link to the ordering site.
 - Click the link to go to the ordering site, and select your language preference.
 - Enter your login ID and password provided in the e-mail sent to you.
 - From the catalogue choice list, pick the catalogue for Alberta Health and Wellness.
 - Add items to your shopping cart as required, and follow the instructions.

2. Printable PDF versions of the forms are available directly from our website. This allows you to obtain small quantities of forms, and is ideal when forms are required immediately. Forms can also be printed from our website in black and white or colour and photocopied as required. To obtain forms from our website, go to www.health.gov.ab.ca/ahcip/forms.html.

3. The Forms Requisition (AHC0144) is designed as a postcard and may be mailed or faxed directly to our warehouse. An example of the Forms Requisition is shown at the right. You will be sent a new Forms Requisition with each supply of forms you receive. If you require a Forms Requisition, please call, write, or visit our website.



Forms Requisition
Health Care Insurance Plan

For quantities less than 10, or to obtain forms immediately, download forms from the Alberta Health and Wellness website at www.health.gov.ab.ca/coverage/ahcip/forms.html.

Forms may also be ordered on-line at www.dbf.com/Mktg/facs/index.asp. On-line orders will be processed within one working day.

Mail this card to the address pre-printed on the reverse side, or fax your order to (403) 272-7774.

Form number	Form/brochure name	Circle quantity
AHC0102	Application for Alberta Health Care Insurance Plan Coverage	10 25 50 100 ____
AHC0107	Notice of Change	10 25 50 100 ____
AHC0199	Employee Group Commencement and Termination	10 25 50 100 ____
AHC0201	Application for Alberta Blue Cross Non-Group Coverage	10 25 50 100 ____
AHC0208G	Application for Premium Subsidy	10 25 50 100 ____
AHC0391	Application for Retroactive Premium Subsidy	10 25 50 100 ____
AHC0460	Notice to Terminating Employees	10 25 50 100 ____
AHC0520	Employee Group Coverage Change Notice	10 25 50 100 ____
AHC0656	Application for Waiver of Premiums	10 25 50 100 ____
AHC0901G	Supplemental Application for Premium Subsidy	10 25 50 100 ____
AHC0930	Changes to Group Administrator Information	10 25 50 100 ____
AHC1086	Group Payment Listing for Senior's Premium Remittances	10 25 50 100 ____
NCN0009	"Your Alberta Health and Wellness Care Insurance Plan" brochure	10 25 50 100 ____
NCN0008	"Blue Cross Non-Group Coverage" brochure	10 25 50 100 ____
Other (please specify)		

Shipping address. Please print clearly

Group name	Phone Number
Mailing address (Street or PO Box)	
City/Town/Village	
Province	Postal Code
Email address (if available)	

AHC0144 (2004/12)