



Direct Deposit Form

If you currently receive your claims reimbursements by cheque, you can now take advantage of electing to have these payments deposited directly into your account. Direct deposit is a convenient way to receive reimbursement into your account as fast as possible.

It can take up to 3-5 business days to process your request, so please remember this when changing or deleting your bank account information.

Policyholder Information (please print clearly)

Policy #	Certificate #	Policy Name
Surname	Given Name(s)	Phone #
Address (#, Street Name)		Apartment/Suite #
City	Province	Postal Code
E-mail Address (mandatory)		

Bank Information

Please attach a blank cheque with "VOID" written across the front of your cheque or provide a bank issued Pre-Authorized Payment/ Deposit form and forward your completed information to memberhelp@nexgenrx.com. **Any submitted forms without the required information will not be updated.**

Authorization

The information that I have provided above is accurate. I will notify NexgenRx of any changes to this data. Please allow NexgenRx to credit my bank account (as per the details provided above) with all my benefit payments. NexgenRx or I can cancel this agreement at any time with written notice.

Policyholder's Signature	Date
Bank account holder's Signature (if not the same as the policyholder)	Date

At NexgenRx, we know the importance of maintaining your privacy and the confidentiality of personal information. All personal information concerning yourself and your dependants (if any) will be collected, used and disclosed by NexgenRx only for the purposes of adjudicating claims, administering your benefit plan or for certain ancillary purposes, all as set out in the NexgenRx Privacy Policy published on our website at www.nexgenrx.com. You may obtain a printed copy of such Privacy Policy by writing to us at 145 The West Mall, PO Box 110 U, Toronto, Ontario M8Z 5M4, to the attention of our Chief Privacy Officer.