



ESCO Change/Cancel Form

ESCO requires this form to be completed and signed before a policy is changed or canceled. The effective date will be from the date of the postmark or date of FAX transmission.

Please include copies of any corroborative documents (for example, an invoice showing the change of a serial number) along with this form.

ESCO will refund any unearned premium, less a processing fee of \$10.00 for canceled policies.



Policy And Wearer Information

Please complete the information below:

Policy Information

ESCO Policy Number _____

Effective Date _____ Expiration Date _____

Wearer Information

Wearer Name _____

Wearer Date of Birth _____

Parent/Guardian Name _____
(If applicable)

Mailing Address _____

City/Province/
Postal Code _____

E-Mail Address* _____

Phone Number _____

*This information is NOT required, but will help us to serve you better.



Cancellation Request

Check the box that best describes the reason for cancellation of this policy.

Returned Device Wearer Request Wearer Deceased

Other _____

Explanation _____

Please sign below to indicate your authorization to cancel your policy.

Wearer or Parent/Guardian Signature Date
(Signature required for cancellation.)



Change Request

Check the boxes that apply to the changes you would like made to this policy. Please provide the old information and new information in the chart below.

Wearer Information (name, address, phone number, etc.)

Device Serial Number

Other _____

Old Information	New Information

Practitioner Information

Office Name: _____

Address: _____

City/Province/
Postal Code: _____

Phone Number: _____

ESCO Center Number: _____
(Please call ESCO 866-662-0206 to obtain center number)

Please sign below to indicate your authorization to make the changes described on this form.

Practitioner Signature Date
(Signature required for change of serial number.)

Please Mail completed form to:

ESCO
1710 Chateaguay Street
Huntingdon, QC J0S 1H0

OR

Fax completed form to ESCO at **450-264-3081**.