


NOTE: When printing, please use the highest quality setting available on your printing device.


FOLD
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CUT ALONG DOTTED LINE

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**Students' Association of
Mount Royal University**






Care Card

Student's Signature

Please enter your applicable student ID number in the space provided on the front of this card. If student ID number is not 9 digits please pre-fill with zeros.

PHARMACIST: Please access the ASSURE system and enter the following information: 11 330756 Student ID number 0 _____ 01

DENTAL OFFICE: Please use the following information:
Great-West Life group number 330756, Student ID number _____



www.gallivan.ca/studentnetworks/members/MountRoyal

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**SAMRU Student
Benefits Plan Office**

Room Z001
Wyckham House
4825 Mount Royal
Gate S.W.
Calgary, Alberta
T3E 6K6
(403) 440-6267

USING THE CARE CARD:

- This card does not require a colour printer
- Carry your **Care Card** with you at all times.
- **New Eligible Students:** A reminder that this card will not work until the enrolment process has been completed. Please contact your **Student Benefits Plan Office** for details.
- Please contact the **Student Benefits Plan Office** to verify your **applicable** student ID number.
- Contact your **Student Benefits Plan Office** to confirm your eligibility for coverage.
Downloading of this card does not confirm eligibility or benefits coverage.
- Your **Care Card** is used for pay direct prescription drug transactions and/or pay direct transactions at your dental office only. All other claims require completed claim forms and original receipts to be sent directly to your insurance company. Claim forms are available at your **Student Benefits Plan Office**.
- If you experience any problems using your **Care Card** please ask your Pharmacist or Dental Office to contact your **Student Benefits Plan Office** immediately for assistance.