



Enrollment Form

Tel, 204-355-9100
Fax, 204-272-3412
baa@theaidplans.ca

Brotherhood Auto Aid Canada

Box 27 Blumenort MB RoA oCo

Contact Information

Please fill out completely

Name Primary Phone Alternate Phone
Email How would you like to receive your statements?
Member of the Church of God in Christ Mennonite? Congregation

Policy Information

If you do not have an active policy with BAA skip this section.

Do You currently have an active BAA policy? Policy Number
Please check your most recent policy statement from BAA. If there are any errors please contact us ASAP. For address corrections use the address information section below to report any changes.

Address Information

For existing policies with no corrections skip this section.

Business Name, *If applicable* Address
City Province Postal Code

Personal Information

Are you married or at least 25 years of age?

If yes, skip this section.

Marital Status Date of Birth

Driver Information

BAA rates are based on the age and marital status of the primary driver, not the owner!

Name of primary driver Age

Vehicle Information

**Examples (F150 Lariat, Accord EXL)*

Year Make Model & Trim Level*
VIN Vehicle Condition
^Description _____

^For Cars - Sedan, Coupe, Automatic/Manual transmission, AWD; For pickups, 4wd, duals, Crew Cab, Diesel, Leather, etc.

Kilometers Value Pricing Method Start Date

Trade/Cancellation Information

Skip if you have no vehicle to cancel

Vehicle Description Line Number Cancellation Date

Loan/Lease Information.

Skip this section if not applicable.

Name of Lender Address
City Province Postal Code

Vehicle Rates - Collision and Comprehensive

Signatures and Documentation

Signature of Applicant Parent's Signature, Required if under 18 years of age. Date