



Direct Deposit Request for CAF and RCMP members

Register for direct deposit and have your payments for eligible health care products or services automatically deposited into your bank account.

All fields must be completed and a VOID cheque attached. When possible, all payments will be made by direct deposit.

Note: You can also register for Direct Deposit on the member website (portal) at www.medavie.bluecross.ca/myinfo.

Payment Information - Direct Deposit

I instruct Medavie Blue Cross to set up direct deposit payments. This form authorizes deposits to the account indicated and does not authorize withdrawals or any other transactions with respect to the account. All information will be treated as private and confidential. I will advise Medavie Blue Cross promptly of any changes to my bank, branch or account number.

☐ CAF Member ☐ RCMP Member

Health Care Identification Card Number (begins with a M or R): _____

Base/Detachment Address: _____

Contact Telephone Number: _____

Full Name: _____

Date of Birth: _____ Prov/Terr: _____

Bank Information

Bank Name: _____

Branch Name: _____

Branch Address: _____

City: _____ Prov/Terr: _____ Postal Code: _____

Bank No.: Branch/Transit No.:

Account No.:

Signature: _____ Date: _____

Submit Completed Form to:

Complete all information and attach a copy of your VOID cheque.

Medavie Blue Cross
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Moncton, NB
E1C 8L3