

REQUEST FOR DOCUMENT IN ALTERNATE FORMAT FORM

Name	
Phone Number	
Email	
Name of Document	
Format Requested: (ie: Large print, electronic, etc)	
Additional info regarding the request or document:	

- Members/customers to submit form to store contact and accessibility@caasco.ca
- Associates to submit form to accessibility@caasco.ca and cc Leader

This form applies to CAA Club Group (CCG) and its affiliated companies, including CAA Insurance Company, Orion Travel Insurance Company, Echelon Insurance, CAA South Central Ontario, CAA Manitoba and CAA Services (South Central Ontario) Inc. These are collectively referred to as “CAA Club Group of Companies”).