

Nova Scotia Seniors' Pharmacare Program

Registration Form

Eligibility

I will not have other prescription drug coverage that will continue after age 65

Please be advised that each senior, regardless of marital status, must apply for the program. If you wish to have your premium assessed based on your income information, please sign, and complete the income verification consent below. If you are sharing a household with a partner or spouse, both residents must sign below to assess your premium based on household income.

Resident Information

Last Name	First Name	Date of Birth	Day	Month	Year
Health Card Number	Daytime Phone Number	Marital Status			
		Married/Partnered		Single	
Mailing Address	City	Province	Postal Code		

Income Verification Consent

I/we hereby consent to the release, by the Canada Revenue Agency, of information from my income tax records to the Nova Scotia Department of Health and Wellness, or its authorized representatives. This authorization is valid for two taxation years prior to my signing the application and each subsequent consecutive taxation year for which assistance is requested by me or on my behalf. This information will be relevant to and used solely for the purpose of the general administration and enrollment in the Nova Scotia Seniors' Pharmacare Program. This information will not be disclosed to any person, department, or organization without my approval. I understand if I wish to withdraw this authorization, I may do so at any time by writing to the Seniors' Pharmacare Program.

Signature of Applicant	Applicant Social Insurance Number	Date
Spouse/Partner Health Card Number	Spouse/Partner Social Insurance Number	
Signature of Spouse/Partner (if applicable)		Date

Submit Your Form

Please return this completed form, with any other required forms, to the Nova Scotia Seniors' Pharmacare Program.

Online:
<https://novascotia.ca/dhw-pharmacare-12>

By mail:
 Nova Scotia Seniors' Pharmacare Program
 PO Box 9322
 Halifax NS B3K 6A4

By fax:
 902-468-9402

Please visit novascotia.ca/msi-online for the self-service options available to you

The personal health information submitted above is protected by the *Personal Health Information Act* and is only collected, used, retained, and disclosed to process your request unless otherwise authorized by the legislation or with your express consent. This information is collected under the authority of the *Health Services and Insurance Act*, or the *Fair Drug Pricing Act* to administer Nova Scotia's health insurance and drug programs.