

**Form #MAL-DT14** (Rev. September 5, 2014)  
**Dietician and Nutritionists Endorsement**

This form attaches to and forms part of the MEDICAL MALPRACTICE INSURANCE- Form # MAL 2014-CI.

It is hereby understood and agreed as follows:

**Underwriters** shall not be liable for any **Claim** or series of **Claims** arising out of Dietician's or Nutritionist's consulting that does not follow or conform to the Canada Food guide or any other equivalent regulations.

Nothing herein contained shall vary, alter or extend any provision or condition of this Policy other than as above stated.

SAMPLE