



# Coverage Request for Catastrophic Student Accident Insurance

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Today's Date: Requested Effective Date:

## **Policyholder Information**

Policyholder:	Policy Number:				
Street Address:					
City:		State:		Zip Code:	
First Day of School:	Last Day of School:		Football	Coverage Effective Date:	

#### **Covered Activities and Rates**

**Class 1:** All students including interscholastic athletes, intramural sports participants, student coaches, student managers, student trainers, athletic trainers, head coaches and assistant coaches.

**Class 2:** All interscholastic athletes, cheerleaders, band members, majorettes, student coaches, student managers, student trainers, athletic trainers, head coaches and assistant coaches.

**Class 3:** All interscholastic athletes, cheerleaders, band members, majorettes, intramural sports participants, gym class, participants, student coaches, student managers, student trainers, athletic trainers, head coaches, assistant coaches and student participants of school sponsored non-sport extracurricular activities.

Class 4: All students and intramural sports participants, excluding coverage for interscholastic athletes.

#### Please select the Class to be covered (on left), the Plan, and the Covered Sports for the Plan selected.

		Plan A			Plan B				Plan C				
Accident Medical Maximum Benefit		\$1,000,000				\$5,000,000			\$7,500,000				
Catastropl	nic Cash Plan	With C	at Cash	Without	Cat Cash	With C	at Cash	Without	Cat Cash	With Cat Cash Without Ca		Cat Cash	
Covered Spo (Not Applica	orts ble to Class 4)	All Sports	All Except Football	All Sports	All Except Football	All Sports	All Except Football	All Sports	All Except Football	All Sports	All Except Football	All Sports	All Except Football
Class	Grades Pre-K – 8	\$0.74	\$0.65	\$0.58	\$0.50	\$0.82	\$0.70	\$0.67	\$0.56	\$0.86	\$0.74	\$0.70	\$0.59
1	Grades 9-12	\$1.97	\$1.21	\$1.39	\$0.85	\$2.17	\$1.35	\$1.59	\$0.98	\$2.28	\$1.42	\$1.67	\$1.03
Class	Middle School or Jr. High	\$1.34	\$0.80	\$0.93	\$0.58	\$1.48	\$0.85	\$1.08	\$0.63	\$1.55	\$0.89	\$1.13	\$0.66
2	Senior High	\$2.67	\$1.31	\$1.80	\$0.91	\$2.87	\$1.42	\$2.00	\$1.03	\$3.01	\$1.49	\$2.10	\$1.08
Class	Middle School or Jr. High	\$1.60	\$0.96	\$1.08	\$0.70	\$1.71	\$1.04	\$1.19	\$0.78	\$1.80	\$1.09	\$1.25	\$0.82
3	Senior High	\$2.84	\$1.50	\$1.90	\$1.02	\$3.06	\$1.61	\$2.13	\$1.13	\$3.21	\$1.69	\$2.24	\$1.19
Class	Grades Pre-K – 8	\$0.62 \$0.46		.46	\$0.63		\$0.48		\$0.66		\$0.50		
4	Grades 9 - 12	\$0	0.85 \$0.55		.55	\$0.88 \$0.58		\$0.92		\$0.61			
Minimum Premium		\$4	50	\$400		\$550		\$500		\$650		\$600	

## Based on the Class, Plan, and Covered Sports above, please insert number of students and applicable rates below.

Classes 1 & 4	Number of Students		Rate Per Student		Premium
Grades Pre-K - 8		X		=	
Grades 9 - 12		Х		=	
Classes 2 & 3	Number of Students		Rate Per Student		Premium
Middle / Junior High School		X		=	
Senior High — Grades 9 – 12		Х		=	
			Total Annual Premium	=	
			Minimum Premium Due	=	

(Premium is fully earned upon inception and non-refundable.)

# **Catastrophic Claim History**

Are you aware of any catastrophic claims or injuries? Yes No If you answered Yes, please provide a brief description of the loss below.

# **Coverage Details**

List the names of all schools and grades to be covered, or attach a separate sheet listing the schools

School Name	Grades	Number of Students	Number of Athletes

School Name		Grades	Number of Students	Number of Athletes
Acknowledgement and Signature				
Signed for the Proposed Policyholder: X				
Name:	Title:			
Email:	Phone:			