

SCHOOL DISTRICT

LETTERHEAD

Hand out to each student
1st day of school or prior to first day of practice

Dear Parents:

The school district does not provide any type of health or accident insurance for injuries incurred by your child at school.

As a service to students and their families, our school is making available a student accident insurance plan for your child at a very nominal cost. The district offers this program because of trends in rising family health and dental insurance costs, increased deductibles, co-payments, or lack of health or dental insurance coverage.

REASONS TO PURCHASE THIS COVERAGE:

1. Deductible and co-pays in your health plan. Many health plans have increased the amount of out-of-pocket expenses.
2. No insurance.

This plan will provide benefits for medical expenses incurred because of an accident. If you have other insurance, benefits can be applied to your deductible or co-pays.

If you have no other insurance, this will become your primary accident plan.

PURCHASE COVERAGE ON-LINE (with Visa or MasterCard) at www.1stAgency.com and then follow directions at "Find Your School."

All questions regarding this coverage should be directed to First Agency at (269) 381-6630, or toll free at (800) 243-6298.

Please sign and return the information below if you already have adequate insurance.

Thank you,

_____ (title)

PARENTAL INSURANCE WAIVER

Student's Name _____

We have adequate insurance to protect our son/daughter in case of an accident.

Parent's Signature _____ Date _____