

BETHEL UNIVERSITY ATHLETIC DEPARTMENT

ACKNOWLEDGEMENT OF INSURANCE REQUIREMENTS

Please note, all Bethel University student-athletes must provide evidence of insurance that includes coverage for athletically-related injuries. This is a pre-requisite for practice and competition. No student will be allowed to participate in any way until such evidence of current insurance coverage is on file with the Bethel University department of athletics. The Acknowledgement of Insurance Requirements form and an insurance card, or photocopy of both sides, must be on file before a student can participate.

Insurance coverage must have a limit of at least \$75,000 and cover athletically-related injuries.

If your insurance does not meet these requirements, Bethel University will review the individual circumstances to determine if the insurance meets the insurance coverage requirement.

Bethel University will assume no responsibility whatsoever for the payment of, or authorization to pay, medical expenses resulting from injuries that occur while participating in intercollegiate athletics at Bethel University.

If you have questions regarding the terms of your coverage, you should contact your insurer immediately. Please be sure to note if there are any exclusions in your policy regarding athletically-related injuries.

The NCAA's Catastrophic Injury Insurance Program covers student-athletes who are catastrophically injured while participating in a covered intercollegiate athletic activity (subject to all policy terms and conditions). The policy has a \$75,000 deductible. This coverage does not qualify as the basic coverage required for participation in athletics at Bethel University. It is supplemental coverage in the event of a catastrophic injury. More information on this program can be found on the NCAA's web-site at www.ncaa.org.

To be signed by policy holder:

I, _____, as policy holder attest that
(policy holder name, please print)

_____ has insurance coverage under a current, in force insurance policy that
(student-athlete name)

meets the above requirements for injuries that occur while he/she is participating in intercollegiate athletics.

If there is a material change in coverage or expiration of coverage, I agree to notify Bethel University of this development and update the insurance information I have on file with Bethel University.

I understand and agree that Bethel University will assume no responsibility whatsoever for the payment of, or authorization to pay, medical expenses resulting in injuries that occur while participating in intercollegiate athletics at Bethel University.

(policy holder signature) (date)

*******IMPORTANT*******

YOU MUST INCLUDE A COPY (FRONT AND BACK) OF YOUR CURRENT INSURANCE CARD AND THE COMPLETED EMERGENCY CONTACT AND INSURANCE INFORMATION FORM.

BETHEL UNIVERSITY
EMERGENCY CONTACT AND INSURANCE INFORMATION

Last Name _____ First Name _____
ID _____ Sport _____ Date of Birth _____
Address _____
Phone (AM) _____ Phone (PM) _____

Emergency Information

Contact _____ Relation _____
Address _____
Phone (AM) _____ Phone (PM) _____

Medical Information

Doctor _____ Phone _____
Clinic _____ City, State, Zip _____

Medical Insurance Information - **PLEASE DO NOT LEAVE ANY LINES INCOMPLETE**

Insurance Company _____
Phone _____ Policy Holder _____
I.D. # _____ Group # (if applicable) _____
Policy Limit _____ Policy Deductible _____
Policy Co-Pay _____
Does this policy Cover athletically –related injuries? YES NO (circle one)

I, _____, attest that I have insurance coverage under a current
(student-athlete name)
in force insurance policy for injuries that occur during my participation in intercollegiate athletics.

If there is a material change in coverage or expiration of coverage, I agree to notify Bethel University of this development and update the insurance information I have on file with Bethel University.

I understand and agree that Bethel University will assume no responsibility whatsoever for the payment of, or authorization to pay, medical expenses resulting in injuries that occur while participating in intercollegiate athletics at Bethel University.

(student athlete signature)

(date)