TABOR COLLEGE INSURANCE WAIVER FORM

Tabor College requires that every <u>full-time student</u> participate in the Student Accident and Health Insurance Plan unless this waiver form is completed and returned together <u>with a copy of both sides of your current health insurance identification card</u> before you arrive on campus.

Student's Name					
Last	Last First		Middle		
	Tabor Student ID Number				
Home Address	City_		State	Zip Code	
I do not wish to purchase the Tabor College policy, which meets or exceeds the benefits li expenses incurred by myself/son/daughter	sted in the broch	nure and acknowledge th	nat I am legally		
Name of Insurance Co.	Company Phone #				
Insurance Company Address					
Policy # ID)#	(Group #		
		e items; fill in what information			
Parent's Employer if insurance is provided	through an em	ployer			
Name of Policyholder (parent, spouse, sel	f, etc.)				
Policyholder SS#	Policyholder Birthdate				
Signature	Date				
(Student's Signature, or Parent/Guardian	n's Signature if Stud	ent is under Age 18)			
Mail: Tabor College, Stud	lent Life Office,		illsboro, KS 67		
If you are playing intercollegiate athle	-	-			
		Birthdate (mo/day/year)			
•			Physician's phone #		
Address of Policy Holder		City	State _	Zip Code	
Policy Holder's phone		TI DD00			
Is your medical coverage through a HMO?		Through a PPO?	□ Yes □ N		
Does your insurance policy cover "out of ar	·	•		•	
Dans it was vive a vefewal?	☐ Yes ☐ No	If NO, what is the limit of medical coverage?			
Does it require a referral?	□ Yes □ No	If YES, physician must be listed above. If YES, how much is it?			
Does it require a co-pay?	□ Yes □ No	II 1E5, HOW HILLER IS) IL!		
I agree that the above information is true and attend to obtain any insurance information and College, the medical facilities, and the insura diagnoses, X-rays and other data). A photo copy	I to obtain any ins ance agency can	surance information and inspect or secure copies	to file any athle of case history	etic insurance claims. (Tabor y reports, laboratory reports,	
Student-Athlete or Parent/Guardian Signature	e				