Dear Parents:

Our school district has made arrangements with Griffin Insurance to provide student accident and health insurance for those wishing to purchase coverage this year. Please note the coverage shown on the application. Covered losses less than \$250 are paid without regard to other insurance. Please note the option to purchase 24 hour accident and sickness coverage is available to be purchased within 75 days of the school year or moving into the district of loss of other coverage.

Senior High football coverage requires an additional premium. All other school supervised sports are covered under the plan. On claims over \$250 this is an excess coverage policy for which benefits are payable only for that part of the loss not covered by other collectible insurance. If a person has no other insurance, the Company will pay the covered medical expenses incurred within one year, up to the specified limits of the policy.

Please note that the student applications will be available on our website. Complete the application and check the boxes for coverage desired. Sign where life insurance is shown, if desired. Tear off and keep the rest of the application, as it shows not only the coverage but the exclusions and limitations of the policy.

Mail the applications directly to Griffin Insurance, 300 Coshocton Avenue, Mount Vernon, OH 43050 along with a money order of check payable to Griffin Insurance. The school will be notified as to who takes out coverage. You can call Griffin Insurance at 1-800-278-2544 for more information.

In case of an accident the student or parent should immediately go to the building principal who will sign and provide the claim form if only school time coverage is taken out. 24 hour coverage needs no signature. The policy number shall be provided by the school for the claim or you can call 1-800-278-2544. You may give that policy number to the doctor or hospital but the bills should be sent to the parent or guardian who attach them to the claim form. Once completed, mail to the claims office at Guarantee Trust Life Insurance, PO Box 1148, Glenview, IL 60025. If you have any further questions regarding a claim, please call 1-800-622-1993. It is the responsibility of the parent or guardian to file the claim.

2015-2016 STUDENT INSURANCE **PROGRAM**

For half a century we have been providing Student Accident and Athletic Insurance to schools in Ohio. Our reputation speaks for itself.



PAYS UP TO \$25,000

- NO DEDUCTIBLE.
- ONE TIME ANNUAL PREMIUM PAYMENT.
- THE FIRST \$250 OF ALL ELIGIBLE CHARGES ON EACH INJURY CLAIM IS PAID IN ADDITION TO ANY OTHER INSURANCE.

COVERAGE INCLUDES:

- HOSPITAL
- **SURGEON**
- X-RAYS
- **AMBULANCE**
- DENTAL INJURY

- DOCTOR VISITS
- **NURSING CARE**
- PHYSICAL THERAPY
- ACCIDENTAL DEATH
- ACCIDENTAL DISMEMBERMENT

COVERS TRAVEL TO AND FROM SCHOOL AND AUTHORIZED SPORTS EVENTS

SCHOOL-TIME AND 24-HOUR-A-DAY PLANS WHICH INCLUDES COVERAGE FOR ALL SPORTS (Except Senior High School Football Only Coverage which requires an additional premium)

Underwritten by:

GTL GUARA TRUST

GUARANTEE

Administered in Ohio by:

N. Carol Insurance Agency, Inc.

Nancy C. Rundels

1989 West Fifth Avenue, Suite 6 Columbus, Ohio 43212-1912 Phone: (614) 486-1666 for details or service by a local agent

STUDENT AND ATHLETIC INSURANCE PLANS

SCHOOL-TIME STUDENT ACCIDENT COVERAGE: Protects your students the entire school year, during regular school sessions, as well as participating in other school-sponsored activities requiring the attendance of the student. Protects your students while traveling directly to or from the student's residence and school to attend or participate in school activities. Coverage for senior high school football injuries is only provided by Optional Senior High School Football Only Coverage.

24-HOUR-A-DAY ACCIDENT COVERAGE: Protects your students 24 hours a day. Pays benefits for all covered accidents until the end of the policy year. The student is protected AT HOME, AT SCHOOL, AT CAMP, ON VACATION. . . ANY WHERE ACCIDENTS CAN HAPPEN. Coverage for senior high school football injuries is only provided by optional Senior High School Football Only Coverage.

OPTIONAL SENIOR HIGH FOOTBALL ONLY COVERAGE: Players in Grades 10-12 and those in Grade 9 playing or practicing with Grades 10-12 are covered while engaged in the practice or play of Senior High School football under direct school supervision. Covers travel to or from a Senior High School football game or practice as a team member. If travel is in a vehicle, it must be furnished by the school and supervised solely by school employees. Coverage will continue through the date of the last official game of the current season, including playoffs. NOTE: It is not required that Senior High School Football players purchase School-Time or 24-Hour Coverage. However, if they do not purchase one of those coverages, they are not covered for other sports and activities. Senior High School Football premium covers Senior High School Football Protection ONLY. Off-Season Physical Conditioning is not covered, unless 24-Hour Coverage was purchased the previous year.

EFFECTIVE AND EXPIRATION DATES

SCHOOL-TIME STUDENT ACCIDENT COVERAGE: can be purchased at any time. Coverage will become effective upon receipt of the premium. For students who purchased coverage the previous school year, the effective date will be retroactive to the first day of school provided the new premium is paid within 7 days of the opening day of the school term. Students participating in pre-school practice or play for interscholastic sports sanctioned by the Ohio High School Athletic Association will be covered as of the date of actual premium payment but only while engaged in actual practice or game sessions. Other aspects of coverage will not start sooner than the first day of regular school sessions. The expiration date of coverage shall be the close of the regular nine month school term, except while the Insured is attending academic classroom sessions exclusively sponsored and solely supervised by the school during the summer.

24-HOUR-A-DAY ACCIDENT COVERAGE: can be purchased at any time. Coverage will become effective upon receipt of the premium. For students who purchased coverage the previous school year, the effective date will be retroactive to the first day of school provided the new premium is paid within 7 days of the opening day of the school term. Students participating in pre-school practice or play for interscholastic sports sanctioned by the Ohio High School Athletic Association will be covered as of the date of actual premium payment but only while engaged in actual practice or game sessions. Other aspects of coverage will not start sooner than the first date of regular school sessions. Coverage will terminate at the earlier of: a) the date the Policy terminates; or b) the date the Insured ceases to be an Eligible Person; or c) the end of the period for which any applicable premium has been paid.

OPTIONAL SENIOR HIGH SCHOOL FOOTBALL ONLY COVERAGE: Football coverage is effective on the first day of practice as permitted by the OHSAA for all Senior High School Football players, but not prior to August 1st, as this is the official starting date permitted by the OHSAA. An enrollment list showing the names of all Senior High School Football players to be insured and the premium must be in the hands of the agent within 3 days after the first practice, otherwise coverage is effective on the date premium is paid. Coverage will terminate at the earlier of: a) the date the Policy terminates; or b) the date the Insured ceases to be a member of the Policyholder's football team; or c) the last day of regularly scheduled football activity; or d) the date the Insured ceases to be an Eligible Person; or e) the end of the period for which any applicable premium has been paid.

COVERED CHARGES

Policy Maximum \$25,000.00 for any one covered Accident for expense incurred within 52 weeks of the Accident. Treatment must begin within 30 days of the date of the Accident. The Company will pay for Reasonable and Customary Charges incurred.

Benefits are payable <i>up to</i> the dollar amounts specified.		LOW OPTION	HIGH OPTION
	Room & Board, per day	\$150	\$300
Hospital Expense	Miscellaneous Expense for expense incurred while Hospital Confined or for outpatient surgery	\$1,000	\$2,000
	Emergency Care	\$150	\$300
Surgery (includes suturing, cutting and reduction of fractures)	Doctor's Fees, per unit, determined by the Surgical Schedule	\$80	\$160
	Anesthesia, percent of surgical fee	20%	20%
Doctor Visits Non-surgical	Per visit	\$25	\$50
	Physical Therapy, per visit Maximum number of visits per Injury	\$25 3 visits	\$50 3 visits
Outpatient Imaging Procedures	Including x-rays & interpretation	\$100	\$200
	Imaging procedures, other than x-rays	\$125	\$250
Ambulance Expense		\$100	\$200
Dental Expense These benefits are available ONLY for accidental bodily Injury	For Injury to Sound, Natural Teeth, per tooth Up to a maximum of	\$200 \$600	\$400 \$1,200
	Deferred Dental Expense The need for future dental treatment must be certified by a dentist within 52 weeks of the Accident. The company will pay the difference between the amount already paid and the estimated future cost.	\$100	\$200

	OTHER BENEFITS		
Accidental Death and	If Injury causes DEATH or DISMEMBERMENT within 365 days pays as follows: Loss of Life		
Death and Dismemberment	Loss of One Hand or One Foot	\$1,000	
	Loss of the Entire Sight of Both Eyes	\$1,000	
	Loss of Both Hands or Feet	\$10,000	

EFFECTS OF OTHER COVERAGE: No deductible applies to the Policy. The Policy will provide benefits regardless of Other Valid and Collectible Insurance for the first \$250 of eligible charges per Injury. Thereafter, benefits will be paid on an excess basis if the student has other coverages or plans that would provide benefits for the same Injury.

EXCLUSIONS: The Policy does not provide benefits for: (a) Treatment, services or supplies which are not Medically Necessary; are not prescribed by a Doctor as necessary to treat an Injury; are determined to be Experimental/ Investigational in nature by Us; are received without charge or legal obligation to pay; are received from persons employed or retained by the School or any Family Member; or are not specifically listed as Covered Charges in the Policy; (b) Intentionally self-inflicted Injury, violating or attempting to violate any duly enacted law. Injury by acts of war, whether declared or not; (c) Injury covered by Workers' Compensation or Occupational Disease Law; (d) Injury sustained while operating, riding in or upon, mounting or alighting from, any two- or three- or four- wheeled recreational motor/engine driven vehicle or snowmobile or all terrain vehicle (ATV); (e) Suicide or attempted suicide while sane or insane; (f) Injury received while traveling or flying by air, except as a farepaying passenger on a regularly scheduled commercial airline; (g) Dental treatment, except as specifically stated; (h) Injury sustained fighting or brawling, except in self-defense; (i) Treatment in any Veteran's Administration or federal Hospital, except if there is a legal obligation to pay; (j) Re-injury or complications of an Injury which occurred prior to the Policy's Effective Date; (k) Injury caused by or contributed to by aggravation of a Pre-existing Condition; (1) Hernia of any type; (m) Treatment of sickness or disease in any form, blisters, insect bites, frostbite, heat exhaustion or sunstroke; (n) Treatment of vegetation or ptomaine poisoning or bacterial infections, except pyogenic infections due to accidental open cuts; (o) Services of an assistant surgeon or Doctor when surgery is performed; (p) Eyeglasses, contact lenses, routine eye exams or prescriptions therefor; (q) Injury contributed to by the use of alcohol or drugs not prescribed by a Doctor; (r) Cosmetic surgery, except for reconstructive surgery on an injured part of the body.

2015 - 2016 SCI	HOOL TERM PREMIUM RATES		
NO PEI	FUNDS ARE AVAILABLE One	One Time Annual Payment	
Annua Late	Low	High	
SCHOOL-TIME Student Accident Coverage	Optio		
Students Grades K-6	\$24.0	0 \$48.00	
Students Grades 7-12 and			
Faculty and Administrative Personnel	\$39.00	0 \$78.00	
24-HOUR-A-DAY Accident Coverage Students Grades K-6	\$83.0	0 \$166.00	
Students Grades 7-12 and Faculty and Administrative Personnel	\$96.0	0 \$192.00	
SENIOR HIGH SCHOOL FOOTBALL ONLY C	·		
Per Player	\$136.00	0 \$272.00	

NOTE: There is no extra premium for Junior High School Football (consisting of grades 7, 8 and 9) while participating as a member of a Junior High School Team. 9th graders who play or practice with players in grades 10-12 are not covered unless Senior High School Football premium is paid. Coverage for Junior High School Football players is effective on the first day of practice as permitted by the OHSAA but not prior to August 1st. The Student Accident or 24-Hour Accident Coverage premium must be paid prior to the first day of practice for coverage to be effective on that date. Otherwise, coverage is effective on the date premium is paid. An enrollment list showing the names of all Junior High School Football players to be insured and the premium should be given to the Agent. The premium paid covers the student for all other sports and activities.