MARS HILL COLLEGE

2011-2012

Mars Hill, North Carolina

STUDENT INSURANCE WAIVER FORM

PLEASE FILL OUT AND RETURN

Student Insurance Waiver Form must be returned by September 1, 2011 (February 1, 2012 for spring semester enrollees).
Cost $288.00 per year/$193.00 for spring semester enrollees.

Student's Name _____ Student I.D.# _____
Last First Middle Initial

Home Address _____
Street City State Zip

I waive the opportunity to enroll in the Student Insurance Plan because I already have health insurance with:
(a copy of your current insurance I.D. card must be included)

❑ HMO
❑ PPO

_____ _____
Insurance Company Policy Number

Signed _____ Date _____

❑ Student, Not a Minor ❑ Parent ❑ Guardian

This form must be returned to the Business Office, Mars Hill College, North Carolina 28754. If this Waiver Form is not received by September 1, 2011 (February 1, 2012 for spring semester enrollees), the student will automatically be insured and the premium will be added to the student's account.