

## Home School Student Accident Insurance Form

The mission of the Seventh-day Adventist schools in the Georgia-Cumberland Conference is to provide quality education in a spiritual setting for the students enrolled. It is also a goal to be of service to the communities in the area of our schools. One of the ways the schools may provide service is to permit home school students to participate in certain activities, programs, or classes at the school.

This form is to be used to register the home school student for insurance coverage when involved with school activities. One form must be completed for each home school student.

**The student accident insurance is primary for the first \$500.00 and then secondary up to \$25,000 and has a catastrophic accident medical benefit of up to \$1,000,000.**

**Coverage begins:** \_\_\_\_\_ **Coverage ends:** \_\_\_\_\_

School Name \_\_\_\_\_

Parents agree to the following stipulations:

1. Parents will pay a fee to the school to purchase student accident insurance:  
PreK-K - **\$15.00**      1-8 - **\$26.00**      9-12 day student - **\$66.00**
2. Parent's supervision of their child may be requested by the school to assist in supervision during the activities, programs, or classes.
3. Parents will be required to accompany their child on any off-campus trips.
4. The school assumes no responsibility for the home school child outside of the scope of the activities, programs, or classes in which the child is registered to participate.

Student Name \_\_\_\_\_ Birth date \_\_\_\_\_

I have read and agree to the stipulations above. I recognize that the student accident insurance only covers my child during school-sponsored activities.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_