

**INSURANCE**

Washington and Lee University Campus Recreation and Outing Club

Washington and Lee University Campus Recreation and Outing Club requires students to provide evidence of some form of health and hospitalization insurance coverage to supplement the medical care provided by the University’s student health service. This coverage may be in the form of an individual policy already in effect, inclusion in a family policy, or enrollment in the optional group program of accident and sickness insurance provided specifically for Washington and Lee students.

Please indicate below whether you have coverage under an individual or family policy, or (b) in the group plan offered through Washington and Lee.

I shall have health and hospitalization insurance coverage for the academic year, provided by the following:

- (A) Individual of family plan \_\_\_\_\_  
 Subscriber’s Name \_\_\_\_\_  
 Insurance Company \_\_\_\_\_  
 Group and Policy Number \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone # \_\_\_\_\_

- (B) Washington and Lee group insurance plan  
 Student’s Name \_\_\_\_\_

**Emergency Contact Information:**

Name: \_\_\_\_\_

Relation: \_\_\_\_\_

home phone: \_\_\_\_\_

work phone: \_\_\_\_\_

**Secondary Emergency Contact (if necessary):**

Name: \_\_\_\_\_

Relation: \_\_\_\_\_

home phone: \_\_\_\_\_

work phone: \_\_\_\_\_