

STUDENT INSURANCE VERIFICATION FORM

IN ORDER FOR YOU (THE STUDENT-ATHLETE) TO BE ELIGIBLE TO PARTICIPATE,
THIS FORM MUST BE COMPLETED AND RETURNED BY :

Athlete's Name: _____ Sport: _____

Dear Student: The University of Washington Department of Intercollegiate Athletics is financially responsible for athletic injuries occurring in **official practices and competitions ONLY**. Your student insurance plan will be billed as primary for any non-athletic related injury or illness. In addition, the University of Washington Department of Intercollegiate Athletics participates in the NCAA-sponsored catastrophic injury insurance program which provides for initial and ongoing care for student-athletes who are catastrophically injured.

Student's Name _____ Date of Birth _____

Local Address _____
Street _____ City, State, Zip Code _____

Local Telephone # (_____) _____ Cell Phone # (_____) _____

Social Security # _____ Student ID # _____

* Alternate ID# For Foreign Students _____ *If needed contact the UW/WPAS Claims Office below:

Name of Group LifeWise Assurance Company

Insurance Company UW/WPAS Claims Office Group Policy # SHIP UW (03-2010)

Mailing Address for Claims P.O. Box 34600 Seattle, WA 98124-1600 * (866)535-8503 or (206)374-9439

Are You Covered Under The Above Policy? Yes

Does your insurance require: A second opinion for surgery? Yes

Pre-authorization for services? Yes

_____ I hereby authorize a claim to be filed on my behalf under the above individual medical policy.

If there is a change of coverage, I agree to notify the University of Washington and update the insurance information I have on file

I hereby certify that the answers provided are true, complete and correct to the best of my knowledge.

A photocopy of this authorization shall be considered as effective and valid as the original.

Date: _____ Signature of student: _____

THE FOLLOWING INFORMATION AND AUTHORIZATION MUST BE FULLY COMPLETED, SIGNED, AND RETURNED TO:

Dept. of Intercollegiate Athletics
Attn: Athletic Training Room
Box 354070
Seattle, WA 98195-4070
(206) 543-4482
Website: <http://www.uwhuskiesatc.com/>