SCHOOL ADMINISTRATIVE DISTRICT NO. 59

486 Main Street · Madison, Maine 04950 · (207)696-3323 · Fax (207)696-5631

Bonnie Levesque, Superintendent of Schools

Nicole Richardson, *Director of Special Services* Holly Eggleston, *Finance Director*

Christopher Roy, Transportation Director Joan Corson, CPP Payroll/Benefits Specialist

Hand out to each student

1st day of school or prior to first day of practice

Dear Parents:

The school district does not provide any type of health or accident insurance for injuries incurred by your child at school.

As a service to students and their families, our school is making available a student accident insurance plan for your child at a very nominal cost. The district offers this program because of trends in rising family health and dental insurance costs, increased deductibles, co-payments, or lack of health or dental insurance coverage.

REASONS TO PURCHASE THIS COVERAGE:

- Deductible and co-pays in your health plan. Many health plans have increased the amount of out-of-pocket expenses.
- 2. No insurance.

Thank you

This plan will provide benefits for medical expenses incurred because of an accident. If you have other insurance, benefits can be applied to your deductible or co-pays.

If you have no other insurance, this will become your primary accident plan.

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PURCHASE COVERAGE ON-LINE (with Visa or MasterCard) at www.1stAgency.com and then follow directions at "Find Your School."

All questions regarding this coverage should be directed to First Agency at (269) 381-6630, or toll free at (800) 243-6298.

Please sign and return the information below if you already have adequate insurance.

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			PAREN	ITAL INSURAN	CE WAIVER			

Student's Name ______ We have adequate insurance to protect our son/daughter in case of an accident. Parent's Signature _______ Date