



International Campers & Miscellaneous Activities

(Activities Accident Insurance Non-USA)

INSURANCE SERVICES: 12501 Old Columbia Pike, Silver Spring, MD 20904 | campers@adventistrisk.org
 CLIENT CARE: 119 St. Peters Street, St. Albans, Hertfordshire, AL1 AEY, England | FAX: 441-727-865773

DIVISION	UNION	CONFERENCE
ENTITY NAME:	GROUP NAME:	
CONTACT NAME:	E-MAIL:	
CHURCH ADDRESS:		
LOCATION OF ACTIVITY:		
DEPARTURE DATE:	RETURN DATE:	

NAME(S): PURCHASE ON [TRAVELHUB](#) OR ATTACH EXCEL (.xlsx) SPREADSHEET

Please purchase at travel.adventistrisk.org. Use the Excel bulk upload feature to quickly secure your coverage under the International Campers/Activities Accident Insurance icon. Or attach an Excel spreadsheet with the first and last names only of the insureds along with this completed application.

ELIGIBILITY — All Individuals who are participating in the Camp Program or Miscellaneous Activity of the Participating Organisation outside of the USA, whose names are on file with the Participating Organisation and for whom the appropriate premium has been paid and who have chosen a Plan Option.

COVERAGE — While participating in a Camp Program or Miscellaneous Activity sponsored and supervised by the Participating Organization. Coverage Includes direct travel to and from a Camp or Miscellaneous Activity.

BENEFITS/LIMITS	OPTION I	OPTION II	OPTION III	OPTION III-B
Accidental Death & Dismemberment	\$2,000	\$5,000	\$20,000	\$20,000
Accident Medical Expense	\$2,000 primary	\$5,000 primary	\$20,000 primary	\$20,000 primary
Accident Dental	\$250 per tooth, up to \$500	\$250 per tooth, up to \$500	\$250 per tooth, up to \$500	\$250 per tooth, up to \$500
Dread Disease	\$2,000	\$5,000	\$10,000	\$10,000
Other Sickness	\$2,000	\$5,000	\$10,000	\$10,000
Evacuation	-	-	-	\$100,000
Repatriation of Remains	-	-	-	\$50,000
1-8 days	\$ 0.54 per Person	\$ 0.66 per Person	\$ 1.54 per Person	\$ 1.70 per Person
9-10 days	\$ 0.74 per Person	\$ 0.95 per Person	\$ 2.77 per Person	\$ 3.04 per Person
11-20 days	\$ 0.99 per Person	\$ 1.18 per Person	\$ 4.62 per Person	\$ 5.08 per Person
21-30 days	\$ 1.63 per Person	\$ 1.97 per Person	\$ 7.70 per Person	\$ 8.47 per Person
31-60 days	\$ 2.69 per Person	\$ 3.20 per Person	\$14.64 per Person	\$16.11 per Person
61-90 days	\$ 3.16 per Person	\$ 3.68 per Person	\$23.09 per Person	\$25.39 per Person
90-180 days	\$ 9.49 per Person	\$11.05 per Person	\$69.26 per Person	\$76.18 per Person
181-365 days maximum	\$11.65 per Person	\$13.58 per Person	\$80.80 per Person	\$88.88 per Person
Taxes 3%	Add 3% to your total premium	Add 3% to your total premium	Add 3% to your total premium	Add 3% to your total premium

All prices quoted in USD.

Approved by: _____ Date: _____

AUTHORISED CHURCH ENTITY REPRESENTATIVE