



# Miscellaneous Accident Program Application

**Policyholder:** General Conference of the Seventh-day Adventists® & Affiliates

**Policy Number:** SRG 0009139774-C

**Underwriter:** National Union Fire Insurance Company of Pittsburgh an AIG Company

Please submit your completed application and full estimated or minimum premium payment to:

Adventist Risk Management, Inc.

Placement Services

12501 Old Columbia Pike, Silver Spring, MD 20904

Telephone: 888-951-4276 | Fax (toll-free): 866-381-0215 | Email: [sttservice@adventistrisk.org](mailto:sttservice@adventistrisk.org)

NAME OF ORGANIZATION		
STREET ADDRESS		
CITY	STATE	ZIP
TELEPHONE	EMAIL	COVERAGE DATES FROM: TO:

**SELECT ORGANIZATIONAL COVERAGE** (Purchase these products online at [adventistrisk.org/insurance](https://adventistrisk.org/insurance)):

SELECT ELIGIBLE CLASS		NUMBER OF DAYS/ MONTHS	NUMBER OF ENROLLED MEMBERS	COST OF PROGRAM PER MEMBER	PREMIUM DUE
	<b>Group Coverage</b>				
	<input type="checkbox"/> <b>Annual Conference-wide Membership Activities</b> (This selection requires 100% Conference Membership. When the Annual Conference-wide Membership Activities is purchased, the following coverages are included: Pathfinder Club, Day or Conference Camp, Resident or Conference Camp—Accident Medical, Vacation Bible School, and Activities Accident.)			\$1.09/member/year	
	<input type="checkbox"/> <b>Pathfinder Clubs</b>			\$2.68/12 months	
				\$2.07/9 months	
				\$1.38/6 months	
	<input type="checkbox"/> <b>Day Care/Nursery School/Pre-School</b>			\$2.68/12 months	
	<input type="checkbox"/> <b>Day or Conference Camp Activities</b>			\$0.21/day	
	<input type="checkbox"/> <b>Resident or Conference Camps</b> (Accident Medical Only): <input type="checkbox"/> Seasonal <input type="checkbox"/> Annual			\$0.24/day	
	<input type="checkbox"/> <b>Resident or Conference Camps</b> (Accident & Sickness Medical Only): <input type="checkbox"/> Seasonal <input type="checkbox"/> Annual			\$0.37/day	
	<input type="checkbox"/> <b>Swim Club</b>			\$2.68/12 months	
	<input type="checkbox"/> <b>Vacation Bible School</b>			\$0.21/day	



	SELECT ELIGIBLE CLASS	NUMBER OF DAYS/ MONTHS	NUMBER OF ENROLLED MEMBERS	COST OF PROGRAM PER MEMBER	PREMIUM DUE
	<b>Activities Accident</b>				
	<input type="checkbox"/> Activities Accident (Misc. Trips and Short Term Activities)			\$0.31/day	
	<b>Recreational Sports Activities</b>				
	<input type="checkbox"/> Recreational Sports Activities (outdoor sporting activities: snow ski, go-carts, skateboards, para-sail, roller blades, dirt bikes, rock climbing/rock propelling)			\$1.43/day	
	<b>Sports League Activities — Youth and non-excluded Adult Sports</b>				
	<input type="checkbox"/> Sports League Activities (Organized athletic activities—EXCLUDES ADULT 18 and over Soccer football, lacrosse, and wrestling)			\$2.82/month	
	<b>Sports League Activities — Adult (NEW Addition)</b>				
	<input type="checkbox"/> Sports League Activities (adult-organized athletic activities for football, lacrosse, soccer and wrestling, ages 18 and over)			\$2.82/day or \$25/month	
	<b>Task Force</b>				
	<input type="checkbox"/> A1 – AD&D \$20,000; Accident Medical \$50,000; Sickness \$50,000			\$1.57/day	
	<input type="checkbox"/> B1 – AD&D \$50,000; Accident Medical \$50,000; Sickness \$50,000			\$1.80/day	
<b>TOTAL PREMIUM DUE FOR ALL GROUPS</b>					

AUTHORIZED SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

TITLE: \_\_\_\_\_

ALL PLAN TYPES REQUIRE A MINIMUM PREMIUM OF \$100 EXCEPT FOR VACATION BIBLE SCHOOL AND MISCELLANEOUS TRIPS AND SHORT TERM ACTIVITIES WHICH REQUIRES A \$25 MINIMUM PREMIUM.

THIS COVERAGE IS AVAILABLE FOR PEOPLE LIVING IN THE 50 STATES OF THE UNITED STATES AND TRAVELING IN THE UNITED STATES.