

INESLE - Spanish Summer Program in Madrid - SPAIN

HEALTH INSURANCE INFORMATION - Form 5

All Spanish Program students at INESLE Madrid are covered for the health insurance that is fully explained at this form. The coverage period is June 29th - July 28th, 2019.

Please Print or Type

Student's name

_____ *Last* _____ *First* _____ *Middle*

Gender: M F Date of Birth: ____/____/____
Month Day Year

Home Address:

_____ *Street and Number Apt. #*

_____ *City* _____ *State* _____ *Zip* _____ *Country*

Applicant: E-mail Address _____ Cell phone _____

Father: E-mail Address _____ Cell phone _____

Mother: E-mail Address _____ Cell phone _____

Home Telephone (_____) _____

Authorization to pay benefits to physician or hospital:

I hereby authorize the insurance company to pay directly to the physician or hospital any medical and/or surgical benefits otherwise payable to me for services described, realizing I am responsible for paying for non-covered services. I understand I am responsible for medical expenses incurred during my child's enrollment at INESLE Madrid.

Signature of parent/guardian _____ Date _____

Signature of student _____ Date _____

Health Insurance Information

“STUDY PLUS STUDENTS INSURANCE POLICY”

MOST IMPORTANT COVERS. Travel assistance anywhere in the world:

- 1. Cost of care due to illness or accidentUNLIMITED
- 2. Physiotherapy costs/chiropracty -Duration of stay: less than 3 months 200 €
- 3. Emergency dental treatment - Duration of stay: less than 3 months 200 €
- 4. Dental care necessitated by an accident 600 €
- 5. Disfigurement Compensation 17.000 €
- 6. Ambulance Costs in connection with treatment UNLIMITED
- 7. Medical transfer or repatriation of injured or ill persons UNLIMITED
- 8. Repatriation or transportation of the deceased Insured UNLIMITED
- 9. Costs of visit by family members (max. 2 members) in the case of hospitalization (more than 5 days) - Trip cost UNLIMITED - Subsistence cost (75 €/day) 750 €
- 10. Convalescence at a Hotel (75€/day)..... 750 €
- 11. Curtailment due to death of a family member UNLIMITED
- 12. Curtailment due to the hospitalization of a family member UNLIMITED
- 13. Theft and material damage to luggage 2.800 €
- - Personal effects 960 €
- 14. Searching for, locating and forwarding missing luggage INCLUDED
- 15. Costs incurred due to delay in the receiving of baggage (100 €/24 hours) up until a limit of 500 €
- 16. Costs incurred due to delay of journey/travel (75 € each 6 hours) up until a limit of .. 300 €
- 17. Compensation in the case of death as a result of accidents which befall the Insured during trips 15.000 €
- 18. Compensation in the case of permanent disability as a result of accidents which befall the Insured during trips 85.000 €
- 19. Public liability 1.000.000 €
- 20. Legal expenses 50.000 €

The signatures below indicate and acknowledge that we have read, understand and agree to the contents of this Insurance policy.

Signature of parent/guardian _____ Date _____

Signature of student _____ Date _____

Return to:

INESLE Madrid - Carlos Aguado
Avda. Monasterio de El Escorial, 35 -H- 4ºB
28049 Madrid - ESPAÑA