This Plan provides reimbursement for medical expenses resulting from a student accident, which includes but is not limited to family paid deductibles and co-insurance. Participation in this Plan is required unless satisfactory evidence of comparable coverage is presented.

**BENEFITS**

The Plan will pay the medical expenses incurred by an insured student by reason of accidental bodily injury sustained (including interscholastic sports) and causing loss commencing during the period of coverage, in accordance with the following available benefits.

Pays 100% of eligible expenses incurred for services actually performed, for medical care or treatment by a doctor, hospital confinement, or for the professional care and services of a registered nurse, for each incident resulting in injury during the 24 month period* immediately following date of injury up to a maximum payment of $1,000.

This inexpensive Plan is broad in its scope and covers accidents on a 24-hour basis wherever the student may be - at school, at home or anywhere in the world - during the term of the policy. There is no limit to the number of accidents covered by the Plan during the policy term. The plan covers accidents whether or not the student is school supervised.
This Plan does not cover accidents occurring before the effective date of coverage.

EXCLUSIONS

Insurance is not provided for loss resulting from:

a) war, any act of war, whether declared or undeclared
b) service in the armed forces of any country
c) injury sustained while taking part in any professional or semi-professional sports contest
d) injury covered under any Worker’s Compensation or Employer’s Liability Law
e) injury sustained while operating, learning to operate or serving as a member of a crew of any vehicle or device for aerial navigations
f) disease or any bacterial infection
g) abdominal or inguinal hernia
h) dental treatment except treatment for injury to sound, natural teeth within 1 year after date of injury
i) taking part in a riot
j) the use of any drug, narcotic, or an agent which is similarly classed or has similar effects unless it is given by and while under the care and attendance of a doctor
k) prescription for or repair or replacement of eyeglasses or contact lenses

POLICY TERM

From 12:01 A.M., on August 1, 2019 to 12:01 A.M., on August 1, 2020. If payment is made after the effective date of the policy, coverage is effective from the date payment is received by the school until the end of the policy term. Late applicants are subject to evidence of insurability, if requested.

COST

$ 30.00 for each participating student for the policy term outlined above.
Claim forms are available at the school. The forms must be submitted to A.W.G. Dewar, Inc. within 30 days from the date of injury. Written proof of loss must be furnished to the Company or A.W.G. Dewar, Inc. within 90 days after the date of loss unless it is not reasonably possible to do so. It is recommended that covered medical bills for treatment of any injury be paid promptly and then sent to A.W.G. Dewar, Inc., Four Batterymarch Park, Quincy, MA 02169-7468 for reimbursement.

This document is a digest. Actual coverages are governed by the insurance contract on file in the School’s Business Office. Coverages may change each academic year. This document describes coverages for the ensuing academic year.

The Plan is underwritten by Atlantic Specialty Insurance Company, New York, NY for A.W.G. Dewar, Inc., dba A.W.G. Dewar Insurance Agency, Four Batterymarch Park, Quincy, MA 02169-7468. The name of each student is listed on a contract which is held by the school, not as agent for the insurance company, but on behalf of insured students and their parents. This leaflet is an outline of coverage for the ensuing academic year. Actual coverages are governed by the insurance policy on file in the school’s business office. Coverage may change each academic year. A.W.G. Dewar, Inc. is the originator of the trademarked Tuition Refund Plan.

NOTE: Any provision of this coverage which, on its effective date, is in conflict with the statutes of the state in which it is issued, is amended to conform to the minimum requirements of such statute.

Website: www.tuitionrefundplan.com
Email: trp@dewarinsurance.com