

Activity Insurance

TRAVEL · CONFERENCES · STUDY · SPORTS · CAMP

Many times, the fun and excitement of a program is interrupted by unfortunate circumstances such as a family emergency or sickness, bags are lost or stolen, or you may need to cancel due to other unforeseen circumstances.

There are two Plans available for you to choose from:

1. **Activity Insurance: The Standard Plan** includes a package of Non-Insurance Services plus insurance benefits including Program Cancellation and Interruption, Program Delay, Accident & Sickness Medical Expense, Baggage and Personal Effects, and Baggage Delay.

Waiver of the Pre-Existing Condition Exclusion: The exclusion for Pre-Existing Condition will be waived provided: (a) You are medically able and not disabled from travel at the time your plan cost is paid based on assessment of a physician; and (b) You purchase this plan at or before the final payment for Your Program.

2. **Activity Insurance Plus: (Not Available to Residents of New York).** The Activity Plus Plan includes a package of Non-Insurance Services plus insurance benefits including Program Cancellation and Interruption, Program Delay, Accident & Sickness Medical Expense, Baggage and Personal Effects, Baggage Delay, plus a Cancel For Any Reason benefit that allows you to cancel your Program for any reason provided you purchase this plan within 21 days of the date your initial payment or deposit for your program is received and you cancel your program up to 2 (two) days before your scheduled Departure Date of your program.

If You cancel Your Program for any reason not otherwise covered by this Plan, (CFAR) benefits provide reimbursement up to 75% of the Prepaid, forfeited, non-refundable Payment or Deposits You paid for Your Program.

Please Note: The Cancel For Any Reason Benefit is applicable to all prepaid non-refundable insured program costs.

Waiver of the Pre-Existing Condition Exclusion: The exclusion for Pre-Existing Condition will be waived provided: (a) You are medically able and not disabled from travel at the time your plan cost is paid based on assessment of a physician; and (b) You purchase this plan within 21 days of the date your initial payments or deposits for your program is received.

Please go to the following website to download the Plan Documents for your state of residence:

<https://www.activityinsurance.com/PlanDocumentation>

The link to purchase coverage online is:

<https://quote.activityinsurance.com/your-trip/?agentCode=TRA45&campaignId=45>

This advertisement contains highlights of the plans developed by Travmark.com, Inc., which include travel insurance coverages underwritten by United States Fire Insurance Company, Principal Office located in Morristown, New Jersey, under form series T7000 et al, T210 et al and TP-401et al, and non-insurance Travel Assistance Services provided by On Call International. The terms of insurance coverages in the plans may vary by jurisdiction and not all insurance coverages are available in all jurisdictions. **Insurance coverages in these plans are subject to terms, limitations and exclusions including an exclusion for pre-existing medical conditions.** In most states, your travel retailer is not a licensed insurance producer/agent, and is not qualified or authorized to answer technical questions about the terms, benefits, exclusions and conditions of the insurance offered or to evaluate the adequacy of your existing insurance coverage. Your travel retailer may be compensated for the purchase of a plan and may provide general information about the plans offered, including a description of the coverage and price. The purchase of travel insurance is not required in order to purchase any other product or service from your travel retailer. CA DOI toll free number is 800-927-4357. The cost of your plan is for the entire plan, which consists of both insurance and non-insurance components. Individuals looking to obtain additional information regarding the features and pricing of each travel plan component, please contact Travmark.com, Inc. 1 Hollywood Avenue #24B Ho Ho Kus, NJ 07423 CA License# 0196377. While Travmark.com, Inc. markets the travel insurance in these plans on behalf of USF, non-insurance components of the plans were added to the plans by Travmark.com, Inc., and Travmark.com, Inc. does not receive compensation from USF for providing the non-insurance components of the plans.

*****PLEASE RETURN THIS FORM TO YOUR PROGRAM DIRECTOR*****

We have ACCEPTED the program protection as offered by Travmark. We have applied and made payment directly to Travmark. Our plan id # is: _____

We have NOT ACCEPTED the program protection offered by Travmark; we have accepted insurance offered through another insurance provider.

We have NOT ACCEPTED the program protection offered by Travmark or any other insurance provider. We understand that all program payments are not refundable.

PARTICIPANT NAME: _____ PROGRAM & DATES: _____

PARENT/GUARDIAN PRINTED NAME: _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____