



**Request Form for Student Athlete to Authorize the  
Billing Insurance to Student Account**

\_\_\_\_\_  
Name University ID # Sport \_\_\_\_\_

\_\_\_\_\_  
Address CLASSIFICATION: FR SO JR Senior (please circle one)

\_\_\_\_\_  
City State On Campus Address, Building / ROOM #

Insurance should be billed for: Fall Only \_\_\_\_ Spring Only \_\_\_\_ Both Fall and Spring \_\_\_\_

Prices are listed on the insurance brochure located in Health Services and the Training Room

REASON: Not on Parents Insurance \_\_\_\_ I do not have my own personal insurance \_\_\_\_

I understand that this insurance is required, and I agree to pay for the insurance through the university payment plan system.

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
DATE

I authorize Our Lady of the Lake University to apply my financial aid award towards said insurance premiums. I acknowledge this debt was incurred for educational purposes and is considered a Qualified Educational Loan as defined in section 221(D)(1) of the Internal Revenue Code.

In the event of default, I agree to pay the holder the amounts incurred as court costs and attorney fees in the amount assessed by the court and/or collection fees assessed by an agency in the business of collecting just debts.

**Procedures:**

1. A Coach or Athletic Trainer will identify students who are in need of insurance.
2. The Coach or Athletic Trainer will have the student fill out the form and inform the student of the pricing of the insurance.
3. The Coach or Athletic Trainer will turn the form into the Athletic Director for processing through the Student Business Accounts Office.
4. The student will be responsible for making payment to the university to pay for the insurance.