## **UIL Accident Insurance Information**

Proof of current insurance coverage must be provided. A photocopy of the current card and the current accident insurance information must also be recorded on the For Consent To Treatment Of A Minor form (CFI).  Acceptance of District Athletic-UIL Accident Insurance  It is the policy of the Spring Branch Independent School District to require every student/athlete participa athletic programs to be covered by accident insurance. The District will not allow any child to participat the parent or guardian has purchased the District's Athletic/U.I.L. accident insurance or has certified the covered by an accident policy offering equivalent or greater coverage than the District's Athletic/U.I.L. accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Inform	insurance I.D.  Authorization  ating in school sponsored te in these activities until the student already is
Please designate whether you intend to accept or refuse District Athletic-UIL Accid Proof of current insurance coverage must be provided. A photocopy of the current card and the current accident insurance information must also be recorded on the For Consent To Treatment Of A Minor form (CFI).  Acceptance of District Athletic-UIL Accident Insurance  It is the policy of the Spring Branch Independent School District to require every student/athlete participa athletic programs to be covered by accident insurance. The District will not allow any child to participat the parent or guardian has purchased the District's Athletic/U.I.L. accident insurance or has certified the covered by an accident policy offering equivalent or greater coverage than the District's Athletic/U.I.L. accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Information presented on the District Athletic-UIL Accident Insurance on the "CFI Info	insurance I.D.  Authorization  ating in school sponsored te in these activities until the student already is
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	cident insurance plan.
participate in the District's Athletic-UIL accident insurance plan. I agree to pay \$25.00 to join this coverage limited benefit insurance policy that covers all student athletes while participating in, practicing, or traveling competition. I understand Parents/Guardians are responsible for filing any claims and paying any subsequinsurance company. See Information page. The cost is \$25, made payable to Spring Branch.	ge. I understand this is a ng for athletic-UIL tent bills not paid by the
(Acceptance)  **** A. Signature of Parent/Guardian	
CFI-R	Refusal
Refusal of District Athletic-UIL Accident Insurance	
I understand that it is a policy of the Spring Branch Independent School District to require that every child middle school or senior high school athletics to be covered by accident insurance. The District will not all participate in such activities until the parent or guardian has purchased athletic/UIL accident insurance of District's Student Accident Insurance Plan, or has certified that he already has a policy of accident insurance substantially the same protection as provided under the District's Student Accident Insurance Plan.	llow any child to fered under the
I, or my insurance agent, have checked my accident insurance policy against the policy provided under the Accident Insurance Plan and I certify that coverage afforded under my policy for protection against accidently while participating in athletics is substantially the same as that provided under the District's Student Plan.	ental injury to such
I further understand that all claims arising out of accidental injury to such child are to be presented to a accident insurance carrier and are not to be presented, processed through, or paid by the carrier under the Accident Insurance Plan.	
Signature at this point signifies that I <u>decline participation</u> in the District's Student Accident Insurance Placoverage.	an for athletic/UIL
(Refusal)	