

## Additional Insurance Request Form

Supplemental insurance is needed if you are including non-members, like family members or friends to an activity or if members are going on a trip longer than 3 days and 2 nights. This insurance is underwritten by United of Omaha Life Insurance Company through an agreement with GSUSA. Return form and check to service center, or mail to Fort Wayne Leadership and Learning Center, at least two weeks prior to the event.

Type	of insurance re	eauested: (pl	ease only se	elect one type	per form)			
For complete descriptions of coverage and frequently asked questions answered, please go to:								
http://www.mutualofomaha.com/girl_scouts_of_the_usa/forms.html.								
	Plan 2 - Accident only (\$0.11/per person per day) – Provides "secondary" insurance for accidents							
	only to cover enrolled participants in approved supervised Girl Scout Activities. Examples: non -							
	member participants at "family or bring a friend events" (Mom and Me, Dad and Me, family							
	campout). This may also be used to provide coverage for "supervised supplemental units" (ie:							
	"bunny/Pixie/boys" unit or a group of children not eligible to participate who are being supervised							ervised by
	some adults other than the leaders – being babysat.) For these types of events coverage only needs							
	to be purchased for participants who are non-members. This plan may also be used for Girl Scout							
	trips that are more than 3 days and 2 night that are close to home –example: a campout at your							
	local camp for 4 days over spring break. In this case you would be purchasing coverage for							
	members and non-members.							
	<ul> <li>Plan 3 – Accident and Illness - Provides coverage for both accidents and illness and is recommended for trips over 3 days and 2 nights. Must be purchased for members and non-member participants. There are 3 types to choose from:</li> <li>Plan 3E (\$0.29/per person per day) – provides "secondary" insurance for accidents and illnes</li> </ul>							
	□ Plan 3P (\$0.70/per person per day) – provides "primary" insurance for accidents and illness.							
	☐ Plan PI (Primary International) (\$1.17 per person per day) – provides primary insurance for							
accidents and illness and travel assistance services for trips which take place out								
USA. (Please also attach a list of each participants (girls and adults) first and								
name and age)								
"Leader" Name: Group or communit							ommunity#:	
						<u> </u>	Premium	
		Beginning	Ending			Number of	each day	Total
		date	date	Number of	Number	participant	Daily Rate	Event
Name and		(MM/DD/	(MM/DD/Y	participants	of days	days	Insert from	premium
location of event		YYYY)	YYY)	(1)	(2)	(1X2)	above (4)	(3x4)
* Minimum \$5 required. More than one event of the same type may be included on each form.								
Use additional sheet if needed, maximum 15 events. Make check payable to GSNI-M.								
Total:								

