



Hesston College Student Health Insurance Plan

Underwritten by National Guardian Life - Policy Number: 201715B87
Administered by Consolidated Health Plans - Group Number: ST0855SH

ENROLLMENT FORM FOR STUDENTS ONLY
Annual/Fall Enrollment Deadline: 9/12/2017
Spring/Summer Enrollment Deadline: 2/8/2018
Summer Enrollment Deadline: 6/10/18

STUDENT: Complete information below for student. PLEASE PRINT LEGIBLY.			
SOCIAL SECURITY #:		OR STUDENT ID #:	
LAST NAME:		FIRST NAME:	MIDDLE INITIAL:
GENDER: <input type="checkbox"/> Male <input type="checkbox"/> Female		DATE OF BIRTH: ____/____/____ (MM/DD/YYYY)	
MAILING ADDRESS – House/Building Number and Street Name:			
CITY:	STATE:	ZIP CODE:	
TELEPHONE #:		EMAIL ADDRESS:	

INSURANCE COSTS:				
	Annual 8/10/17–8/9/18	Fall 8/10/17-1/6/18	Spring / Summer 1/6/18-8/9/18	Summer 5/9/18-8/9/18
Student	<input type="checkbox"/> \$1,652	<input type="checkbox"/> \$674	<input type="checkbox"/> \$978	<input type="checkbox"/> \$421

*Rates above include a Service Fee paid to the servicing broker.

Payment Instructions: Please mail completed form and correct premium to: College Business Office Hesston College, PO Box 3000, Hesston, KS 67062.



NOTICE TO STUDENT: Coverage will be effective the date the correct premium is received by the Company or a representative of the Company or the effective date of the coverage period, whichever is later, unless otherwise stated in the Master Policy. By signing, the student acknowledges the following: 1) He/She has carefully read the brochure and elects to enroll as indicated on this enrollment card; 2) He/She meets the eligibility requirements for this coverage as described in the brochure; and 3) If it is later determined that the student is not eligible, the premium will be refunded. **Premium will not be refunded except for ineligibility or entrance into the armed forces.**

STUDENT'S SIGNATURE: _____ **DATE:** _____

Questions? Please contact Consolidated Health Plans at (877)657-5030.

2077 Roosevelt Avenue
Springfield, MA 01104

877.657.5030
Toll-Free: 800.633.7867

@CHPstudent 
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