ATTENTION PARENTS AND GUARDIANS:

ACCIDENT INSURANCE PROTECTION FOR STUDENTS

www.cabotrisk.com/studentaccident

Delivering adequate insurance coverage for your child in the event of an unforeseen accident...

Your child’s school offers the following insurance products on a voluntary basis:

- $500,000 Around the Clock – 24 Hour Accident Coverage
- $500,000 Around the Clock – 24 Hour Accident Coverage + $50,000 Student Accident Dental Coverage

2022-2023 Voluntary Rates

- 24 Hour Wrap Around Coverage: $50.00
- 24 Hour Wrap Around Coverage + 24 Hour Accidental Dental: $60.00

CHUBB®

Two Ways to Enroll:

Online

Or By Mail

Cabot Risk Strategies LLC
15 Cabot Road
Woburn, MA 01801
800-222-5963
www.cabotrisk.com
ENROLLMENT FORM - STUDENT ACCIDENT INSURANCE  2022-2023 School Year

ENROLLMENT INSTRUCTIONS
- Fill out this enrollment form completely.
- Make your check or money order payable to Cabot Risk Strategies LLC. Be sure to write your child’s name on the check. DO NOT send cash.
- Place this form and your payment into an envelope and mail to the address below.
- Keep your cancelled check or money order receipt as proof of payment.
- Keep the summary document in your records as a description of coverage.
- Print and keep the Student Insurance ID Card.

School System:

School Name:

Student Full Name:

Parent Full Name:

Student Date of Birth (mo/day/year) / / Sex: □ M □ F

Student Home Phone: (  )

Student Address:

Street

City    State    Zip

PLAN SELECTION
Check one:      Annual Premium

☐ 24 Hour Wrap Around Coverage    $50.00

☐ 24 Wrap Around Coverage + Accidental Dental    $60.00

Make check or money order payable to: Cabot Risk Strategies LLC

Amount Enclosed:

Check or money order number:

Signature of Parent/Guardian:

Date:

800-222-5963 | fax: 781-376-9907 | www.cabotrisk.com

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