We Recommend Accident & Sickness Insurance

- Accidents and Sicknesses happen! When they happen to your child, someone must pay the bills.
- Here are accident and sickness insurance plans to cover your child either 24 hours a day (24-Hour Plans) or while in school (School-Time Plan).
- These plans provide benefits to help meet the cost of medical and hospital expense.
- If you have other insurance, these plans can help offset the deductibles and coinsurance for those plans.
- If you have no other insurance, these plans will provide basic coverage.
- Any benefits payable by the Policy as a result of medical, surgical, dental, hospital or nursing service will be paid directly to the hospital or person rendering such service unless proof of payment in full is provided.

FOR ACCIDENT ONLY COVERAGE: The enrollment period will remain open all year for all students. No reduction in premium will be given to late enrollees.

2014-2015 STUDENT INSURANCE PLANS

IMPORTANT PROTECTION FACTS

<table>
<thead>
<tr>
<th>School Time</th>
<th>Accident &amp; Sickness</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑</td>
<td>☑</td>
</tr>
</tbody>
</table>

PROTECT YOUR CHILD FOR LIFE

Very affordable life insurance for your Child

For now and throughout their growing years, the Great Start Plan provides all the basic life insurance you need on your child...up to $10,000. For their future...depending on your original policy, your adult child can increase their original $10,000 coverage to a full $40,000. Just check (✓) the box for life insurance and select the amount you want for your child as you sign up for accident protection. Your child is fully insured from the day your policy is approved and issued. The only exclusion is suicide in the first 2 years (1 year in CO and ND, N/A in MO). This policy provides basic life insurance until your child reaches age 25. At age 25, the policy continues as cash value whole life insurance. Children ages 3 months to 24 years are eligible to apply. Simply complete and sign the application form. Policies are available for $5,000 and $10,000 benefit amounts. The rates are $20 for a year for a $5,000 policy and $40 for a year for a $10,000 policy. At age 25, the rates change to $93 per year for a $5,000 policy and $186 per year for a $10,000 policy. These rates are guaranteed to remain the same for life. Underwritten by GUARANTEE TRUST LIFE INSURANCE CO.

Why not take a positive step to PROTECT YOUR CHILD FOR LIFE?

$1 for the first 3 months. APPLY TODAY!

The Great Start Plan is not a National Guardian Life Insurance Company insured benefit.

Optional Football Coverage begins on the date of premium receipt by the Company, its representatives or school officials, but not prior to the first official date of practice and continues through the last official game of the current season including playoffs. FOOTBALL PREMIUM COVERS FOOTBALL ONLY

24-Hour-A-Day Coverage

ACCIDENT ONLY

Protects your child for the entire school year and extends throughout the summer - right up to the day school opens.

Your child's coverage is good worldwide, 24-HOURS-A-DAY. This includes covered accidents:

☐ At home  ☐ At play  ☐ At school  ☐ On vacation  ☐ Scouting, camping etc.
☐ During travel (see Exclusions and Limitations)

While engaged in sports, except those specifically excluded or for which optional coverage is required*

ACCIDENT & SICKNESS

Protects your child all school year and through the summer, until school re-opens in the fall. This option covers sickness, as well as accidents, 24-hours-a-day! Optional coverage may be required for interscholastic sports. See OPTIONS for available optional sports coverage, if any.

School-Time Coverage

Your child is protected while attending regular school sessions. Also covered is travel directly to and from your residence to attend regular school sessions for travel time required, but not more than one hour before or after regular classes. Travel time on the school bus is extended for any additional time needed. In addition, coverage is provided while participating in (or attending) covered activities exclusively organized, sponsored and solely supervised by the school and school employees, including travel directly to and from the activity in a vehicle furnished by the school and supervised solely by school employees. Optional coverage may be required for interscholastic sports. See OPTIONS for available optional sports coverage, if any.
2014-2015 STUDENT INSURANCE PLANS

POLICY MAXIMUM $25,000.00 FOR ANY ONE COVERED ACCIDENT OR SICKNESS FOR EXPENSE INCURRED WITHIN 52 WEEKS OF THE DATE OF THE ACCIDENT OR THE DATE OF FIRST TREATMENT OF SICKNESS. TREATMENT MUST BEGIN WITHIN 30 DAYS OF THE DATE OF THE ACCIDENT. THE COMPANY WILL PAY FOR REASONABLE AND CUSTOMARY EXPENSE INCURRED.

**COVERAGE & BENEFITS**

BENEFITS ARE PAYABLE FOR EACH COVERED ACCIDENT (OR SICKNESS IF ADDITIONAL PREMIUM IS PAID) UP TO THE DOLLAR AMOUNTS SPECIFIED BELOW.

<table>
<thead>
<tr>
<th>ACCIDENT &amp; SICKNESS OPTION</th>
<th>LOW OPTION</th>
<th>HIGH OPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOSPITAL EXPENSE</td>
<td>ROOM AND BOARD, per day</td>
<td>$150</td>
</tr>
<tr>
<td>/miscellaneous Expense, for expense incurred while hospital confined or for outpatient/day surgery</td>
<td>$1,000</td>
<td>$2,000</td>
</tr>
<tr>
<td>EMERGENCY ROOM</td>
<td>UP TO POLICY MAXIMUM</td>
<td></td>
</tr>
<tr>
<td>SURGERY (includes suturing, cutting and reduction of fractures)</td>
<td>Doctor’s Fees, per unit determined by Surgical Schedule</td>
<td>$80</td>
</tr>
<tr>
<td>Anesthetist, Percent of Surgical Expense</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>Assistant Surgeon, Percent of Surgical Expense</td>
<td>25%</td>
<td>25%</td>
</tr>
<tr>
<td>Doctor visits non-surgical</td>
<td>Per visit</td>
<td>$25</td>
</tr>
<tr>
<td>Physical Therapy/Physiotherapy</td>
<td>Per visit</td>
<td>$25</td>
</tr>
<tr>
<td>Maximum per Injury</td>
<td>$75</td>
<td>$150</td>
</tr>
<tr>
<td>OUTPATIENT IMAGING PROCEDURES</td>
<td>UP TO POLICY MAXIMUM</td>
<td></td>
</tr>
<tr>
<td>AMBULANCE EXPENSE</td>
<td>$100</td>
<td>$200</td>
</tr>
<tr>
<td>DENTAL EXPENSE</td>
<td>For injury to Sound, Natural Teeth Per tooth</td>
<td>$200</td>
</tr>
<tr>
<td>These benefits are available ONLY FOR ACCIDENTAL BODILY INJURY</td>
<td></td>
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</tr>
</tbody>
</table>

Ohio mandates coverage for the following benefits: Emergency Services expense; Treatment of alcoholism on an inpatient, intermediate and outpatient basis; cytologic screening, and mammograms; serious mental disorders; routine patient care costs for cancer clinical trials. Please see policy on file with the policyholder for complete details.

OTHER BENEFITS - Included with Accident Only Options and Accident and Sickness Option

**ACCIDENTAL DEATH AND DISMEMBERMENT** - If Injury causes DEATH or DISMEMBERMENT within 100 days of the accident, the plan pays as follows:

| Loss of Life | $2,000 |
| Loss of One Hand or One Foot | $1,000 |
| Loss of the Entire Sight of One Eye | $1,000 |
| Loss of Both Hands or Feet | $10,000 |

**EFFECTS OF OTHER COVERAGE:** No deductible applies to this policy. The policy will provide benefits regardless of other collectible insurance for the first $250 of eligible charges per injury or sickness. Thereafter, for Accident Only coverages, benefits will be paid on an excess basis if the student has other coverages or plans that would provide benefits for the same injury; for Accident and Sickness coverage, benefits will coordinate with any other valid and collectible insurance or plan.

**EXCLUSIONS** The policies do not provide benefits for:

- Treatment, services or supplies which are not medically necessary; are not prescribed by a doctor as necessary to treat a sickness or injury; are determined to be experimental/investigational in nature by Us; are received without charge or legal obligation to pay; are received from persons employed or retained by the School or any family member; or are not specifically listed as covered charges in the Policy;
- Injury or Sickness arising out of or in the course of employment or which is compensable under any Workers’ Compensation Act or Occupational Disease Act or Law;
- Injury sustained while operating, riding in or upon, mounting or alighting from, any two- or three- or four- wheeled recreational motorized vehicle or snowmobile or all terrain vehicle (ATV);
- Suicide or Intentionally self-inflicted injury while sane or insane;
- Riding as a passenger or otherwise in any vehicle or device for aerial navigation, except as a fare-paying passenger in an aircraft operated by a commercial scheduled airline;
- Expenses incurred as a result of dental treatment, except as specifically stated;
- Fighting or brawling, except in self-defense;
- Treatment of mental or nervous disorders.

The following exclusions are for accident only coverage only:

- Re-injury or complications of an injury which occurred prior to the Policy’s effective date;
- Injury caused by or contributed to by aggravation of a Pre-existing Condition;
- Hemiplegia of any type;
- Treatment of sickness or disease in any form, blisters, insect bites, frostbite, heat exhaustion or sunstroke;
- Treatment of vegetation or ptomaine poisoning or bacterial infections, except pyogenic infections due to accidental open cuts;
- Services of an assistant surgeon or doctor when surgery is performed;
- Eyeglasses, contact lenses, routine eye exams or prescriptions therefor;
- Loss due to acts of war, weather declared or not;
- Injury contributed to by use of alcohol or drugs not prescribed by a Doctor;
- Cosmetic surgery, except for reconstructive surgery on an injured part of the body.

TO FILE A CLAIM: Report accidents to the school. Forms will be furnished through the principal’s office (during vacation time contact the administrators of the plan). COMPLETE PROOF OF LOSS AND ACCUMULATED BILLS MUST BE RECEIVED BY GUARANTEE TRUST LIFE INSURANCE COMPANY WITHIN 90 DAYS.

This is an illustration of your child’s benefits. Please keep for your records. This is not a contract. The master policy is on file with your school.

Administered by: N. CAROL INSURANCE, Nancy C. Rundels, 1989 W. Fifth Ave. #6, Columbus, OH 43212 (614) 486-1666 • For Claim Service Please Call: GUARANTEE TRUST at (800) 622-1993

Underwritten by: NATIONAL GUARDIAN LIFE INSURANCE COMPANY, Madison, Wisconsin.

National Guardian Life Insurance Company is not affiliated with the Guardian Life Insurance Company of America, aka The Guardian or Guardian Life.
2014-15 School Year Application

ONE TIME ANNUAL PAYMENT
FOR ACCIDENT AND SICKNESS PLANS

OPTIONS

LOW OPTION HIGH OPTION

24-Hour-A-Day Plan
Students Grades K-12
❑ $325.00  ❑ $650.00

24-Hour-A-Day Plan
Students Grades K-6
❑ $83.00  ❑ $166.00
Students Grades 7-12
❑ $96.00  ❑ $192.00
Faculty & Admin.
❑ $96.00  ❑ $192.00

School-Time Plan
Students Grades K-6
❑ $24.00  ❑ $48.00
Students Grades 7-12
❑ $39.00  ❑ $78.00
Faculty & Admin.
❑ $24.00  ❑ $48.00

OPTIONAL FOOTBALL COVERAGE
(Grades 10-12, including grade 9 if playing with 10-12)
2014 Season Only
PER PLAYER
❑ $136.00  ❑ $272.00

GREAT START Life Insurance Protection
❑ $1.00 For first 3-months full coverage.
(May be selected with or without other plans)
Pick an Amount
❑ $ 5,000.00  ❑ $10,000.00

Make check payable to your local agent.
NGP-1200 - NGP-2002 L-58-DB

PLEASE REMEMBER TO:

COMPLETE THE APPLICATION FORM AND CHECK THE PLAN AND OPTIONS YOU WANT.

MAKE YOUR CHECK OR MONEY ORDER (PLEASE DO NOT SEND CASH) FOR THE TOTAL ENCLOSED PAYABLE AS INDICATED.

N. CAROL INSURANCE AGENCY, INC.
NANCY C. RUNDELS
1989 W. FIFTH AVE. Ste. #6
COLUMBUS, OHIO  43212-1912

PLEASE NOTE: YOUR CANCELED CHECK IS YOUR RECEIPT. IF CANCELED CHECK IS NOT RECEIVED WITHIN 60 DAYS, PLEASE CONTACT YOUR PLAN ADMINISTRATOR.