

SMWS Athletics
Proof of Insurance Form
for Sports Participation

All participants in athletics are required to have accident insurance coverage during the season. Complete the form below, choosing one of the two options.

Name of Student: _____

School Year: _____

- I am using my own insurance company for accident insurance.

Name of Insurance Company: _____

Address: _____

Policy #: _____

- I will be purchasing coverage through Summit America Insurance Services, available through the school.