## ACTIVITY INFORMATION FORM FOR NIRSA ACCIDENT INSURANCE PROGRAMS INTRAMURAL SPORTS

NAME OF SCHOOL		
ADDRESS		
CITY	STATE	ZIP
NAME (Please Print)	EMAIL ADDRESS	
TELEPHONE	FAX	
TITLE OR POSITION	·	DATE
	#PARTICIPANTS	
SPORTS ACTIVITY	MALE FEMALE	, taki
Nordic Skiing	. <del> </del>	
Alpine Skiing		
Diving		
ce Hockey		
Symnastics		
Lacrosse		Please check programs you would like quoted.
Rugby		you would like quoted.
Vrestling		Basic Accident Medical
Baseball		
oftball		Deductibles:
Basketball		<b>\$250</b> \$500
Handball		\$1,000 \$2,500
Racquetball	- <u> </u>	일하면? 경기:
quash		Catastrophic Injury Insurance
Aartial Arts	- <u> </u>	Catastrophic injury Histitanice
Roller Hockey		
occer		
lag/Touch Football		
olleyball ollows		
lag/Touch Football		
NIRSA Rules)		•
'ennis		
rack & Field		
Bowling		
Other		

## **NIRSA Insurance Programs**

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