Nationwide Life Insurance Company
Enrollment Form for Optional Major Medical Benefit
2008-09
MASSACHUSETTS COMMUNITY COLLEGES

Student Name _____ _____-_____-_____
Last Name First Name MI S.S.#

Gender _____ Date of Birth _____ Telephone #_____ - _____ - _____

Permanent Address _____
House Building Number and Street Name
_____ _____ _____ _____
Apt or Box # City State Zip Code
Mailing Address _____
House Building Number and Street Name
_____ _____ _____ _____
Apt or Box # City State Zip Code

Insured Category

	Annual	Second Semester
Optional Major Med.	□ $425	□ $425

Please check all appropriate boxes

Campus Location:

□ Berkshire Community College
□ Bristol Community College
□ Bunker Hill Community College
□ Cape Cod Community College
□ Greenfield Community College
□ Holyoke Community College
□ Mass Bay Community College
□ Massasoit Community College
□ Middlesex Community College
□ Mt.Wachusett Community College
□ North Shore Community College
□ Northern Essex Community College
□ Quinsigamond Community College
□ Roxbury Community College
□ Springfield Tech Community College
□ Quincy College

Payment Instructions: Make check or money order payable to Nationwide Life Insurance Company. Mail this enrollment form along with premium payment to University Health Plans, One Batterymarch Park, Quincy, MA 02169-7454. Your cancelled check is your only receipt and notification of coverage.

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) Rates are not pro-rated other than as listed on this enrollment form; 3) He/She meets the eligibility requirements for this coverage as described in the brochure; and 4) 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 _____