



SEND ALL CLAIM FORMS TO:  
BOLLINGER, INC.  
P.O. BOX 706  
SHORT HILLS, NJ 07078-0706

## EXCESS STUDENT ACCIDENT INSURANCE

### **\$25,000 Maximum Benefit Blanket Athletic Coverage Including All Interscholastic Sports and Football**

<b>Surgery</b>	80% of Reasonable & Customary
<b>Ambulatory Surgical Facility</b>	80% of Reasonable & Customary
<b>Anesthesia</b>	80% of Reasonable & Customary
<b>Second Opinion</b>	80% of Reasonable & Customary
<b>Physicians Visits</b>	80% of Reasonable & Customary
<b>Nursing Services</b>	80% of Reasonable & Customary
<b>X-Rays</b>	80% of Reasonable & Customary up to 5 Visits
<b>Ambulance</b>	80% of Reasonable & Customary
<b>Hospital Room &amp; Board</b>	80% of Reasonable & Customary
<b>Inpatient Miscellaneous Charges</b>	80% of Reasonable & Customary not to exceed \$3,500
<b>Outpatient Hospital</b>	80% of Reasonable & Customary not to exceed \$2,500
<b>Emergency Room Physicians</b>	80% of Reasonable & Customary
<b>Physiotherapy</b>	80% of Reasonable & Customary up to 5 Visits
<b>Prescription Drugs</b>	80% of Reasonable & Customary
<b>Orthopedic Appliances</b>	80% of Reasonable & Customary
<b>Eyeglasses</b>	80% of Reasonable & Customary
<b>Hearing Aids</b>	80% of Reasonable & Customary
<b>Dental</b>	80% of Reasonable & Customary

**Full Excess Coverage (primary in the absence of other insurance),  
1 Year Benefit Period, \$0 Deductible.**