Gardner-Webb University
Intercollegiate Student-Athlete Insurance Program

All Student-Athletes entering Gardner-Webb University are REQUIRED to have primary health care insurance in
the State of North Carolina that will cover the student-athlete while participating in intercollegiate athletics in
emergency and non-emergency situations. Primary health care insurance is the health insurance that will pay
first on medical claims. This primary health care insurance policy must have a minimum coverage limit of
$10,000. A photocopy of your primary insurance card (front and back side of the card) must be submitted to the
Gardner-Webb University Athletic Training Department. Failure to comply will keep the student-athlete from
participating in their respective sports until primary health care insurance is obtained and on file with the Gardner-
Webb University Athletic Training Department. In addition to the primary health care insurance coverage you
provide, Gardner-Webb University will provide secondary insurance for injuries sustained while participating in
intercollegiate athletics for Gardner-Webb University. The secondary insurance coverage provided by Gardner-
Webb University will pay medical expenses that are reasonable and customary after the primary health care
insurance pays their portion including up to $2,500.00 of any deductible on your primary coverage. NO pre-
exisiting injuries or congenital disorders will be covered under the secondary insurance policy. It is the
responsibility of the student-athlete and his or her parent/legal guardian to notify the University IMMEDIATELY
upon any change in your primary health care insurance coverage. Failure to notify the University of any changes
in the student-athlete’s medical insurance coverage may nullify Gardner-Webb University from responsibility
regarding any medical bills.

We strongly recommend that you research and understand your primary health care insurance benefits prior to
your arrival on campus to make sure that your son/daughter is covered in the State of North Carolina and while
participating in intercollegiate athletics. It is recommended that if you have a HMO/PPO plan, you call your carrier
to inquire about coverage in the Cleveland County Area and secure “guest privileges” for a local provider. Also, it
is advisable to look into your out-of-network coverage in the Cleveland County area. If you are not using your
parent or guardian’s insurance and need a recommendation for coverage to purchase, please contact the
Gardner-Webb University Athletic Training Department. Please note that the University accepts no responsibility
based on any recommendations made concerning primary health care insurance coverage available for you to
purchase as these are only recommendations.

When a student-athlete is injured, all medical insurance claims will be filed with your primary health care
insurance company. The following information is required from the student-athlete in order to process a claim
with the secondary insurance company:

1) Itemized bills from all medical providers
2) Explanations of Benefits (EOB’s) from your medical insurance company
3) Receipts from payments made to medical providers

The Gardner-Webb University Athletic Training staff will assist in expediting the dissemination of this information
to the secondary insurance company and process the remaining portion of the claim for you. Please be advised
that if a balance still exists after both primary and secondary insurance have paid, this will be the
responsibility of the student-athlete.

Your signature on this letter indicates that you have read, understood, and will comply with all that is stated
above. Any false information will nullify Gardner-Webb University from responsibility regarding any medical bills.

“I, ___________________ have read the above letter and understand that Gardner-
Webb University is responsible for injuries which occur while representing Gardner-Webb University in an athletic
practice or competition only to the extent such injuries are covered by the intercollegiate athletics participation
secondary insurance provided by Gardner-Webb University to its student-athletes participating in intercollegiate
athletics.

_____________________________________________     ____________
Student-Athlete’s Signature                          Date                     Date of Birth/Current Age

_____________________________________________    ___________
Parent’s Signature                                    Date

GWU Athletic Insurance Policy 18-19

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