

Sandra Messina  
Administrative Assistant  
Franklin Pierce University  
40 University Drive  
Rindge, NH 03461

Dear Ms. Messina:

I am sending this letter to you with payment for one full year of health insurance coverage, through NAHGA. I understand that the student insurance is offered to me at the rate of \$498.00 per year, which is August 16<sup>th</sup> through August 15<sup>th</sup> of the following year. Furthermore, if for any reason I leave the University (i.e. withdraw, graduate, leave of absence) I understand that the fee is non-refundable. If I enroll during the beginning of the calendar year, my fee will be prorated at 50% of the initial fee.

I have read the brochure which I found on the Franklin Pierce website and understand what is covered by this policy. I understand that this is an injury/illness based insurance plan. I also, realize that I do not get an insurance card, but need to have a claim form for each incident in which I choose to use the insurance plan.

I understand that I need to send this letter of intent no later than September 15<sup>th</sup> for the fall semester and January 15<sup>th</sup> for spring semester. Please confirm that you have received my letter of intent and payment.

Please make check out to: Franklin Pierce University

Sincerely,

\_\_\_\_\_

Name

\_\_\_\_\_

Phone Number

\_\_\_\_\_

Address

\_\_\_\_\_

City, State

Zip Code

\_\_\_\_\_

E-mail address