

Activate Healthcare Enrollment Form

Terms of Enrollment:

- Coverage can begin on the first of each month. If a student enrolls in the program at any other point in the month, the coverage will become active on the first day of the next month.
- The cost of coverage must be paid in full before the start of the enrollment month.
- Student can choose to have 10 month coverage or 12 month coverage.
- Once enrolled, the policy continues until June 31, 2019 for 10 month coverage, or August 31, 2019 for 12 month coverage. There is no option for early cancellation.
- If a student leaves Defiance College, the policy will still continue through the end of the coverage period.

Cost of Enrollment:

Enrollment prior to September 1st = \$445.90 for 10 months, \$535.08 for 12 months.

If enrolling after September 1st, the cost of the coverage is pro-rated at \$44.59 for each month of coverage after the date of enrollment.

Payment Arrangements*:

_____ I will pay today in the Business Office

_____ I mail a check or money order to Business Office: 701 N Clinton Street, Defiance Ohio 43512.

*Include student's ID number and the word "Activate" on the memo line

_____ I will pay online via MyDC.

* All credit or debit card payments will include a 3% convenience fee. All electronic check payments include a \$1.95 convenience fee.

Student Name: _____ Student ID: _____

Signature: _____ Date: _____

Completed enrollment forms should be turned to the Business Office or emailed to kmohring@defiance.edu.