



Travel Protection Plan

Insured	Gender	Age	Departure Date	Return Date	Trip Cost	Premium
			/ /	/ /	\$	

Enrollment Processing Fee (required) \$ 6.00

Note: the enrollment Processing Fee is non-refundable

First Name Last Name

Total Cost	\$
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Address:	Phone:
City:	Cell Phone:
State: Zip:	Destination:
Email Address:	

Name on Card:	Credit Card: (circle) Visa MasterCard Amex Discover
Billing Address:	Card #
State: Zip:	Validation Code: Exp Date: / /
Destination:	Signature:

These premiums are based on a Trip Cost of \$1,000. If you need to insure a higher Trip Cost amount, please contact your Frosch Student Travel agent.

Trip Length	Premium	Trip Length	Premium
Up to 30 days	\$32	Up to 7 Months	\$397
Up to 2 Months	\$97	Up to 8 Months	\$457
Up to 3 Months	\$157	Up to 9 Months	\$517
Up to 4 Months	\$217	Up to 10 Months	\$577
Up to 5 Months	\$277	Up to 11 Months	\$637
Up to 6 Months	\$337	Up to 12 Months	\$697

To view/print the Description of Coverage brochure, click here: <https://frosch.mhross.com>

This Plan is Designed for Frosch Student Travel by:

MH Ross Travel Insurance Services
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