



## USA Federation for Sport Cheering

# High School and College STUNT Insurance Summary

### **PARTICIPANT ACCIDENT AND CATASTROPHIC INSURANCE COVERAGE**

INFORMATION AS OF OCTOBER 2015

**PLEASE NOTE:** *The following information is only a summary of the benefits provided. It is NOT a complete explanation of all the policy provisions or specifics of the policy benefits. No coverage is extended and no representations are made other than what is stated in the policy. For a complete description of the program coverages, exclusions, and benefits, please refer to the policy.*

### **PARTICIPANT ACCIDENT INJURY INSURANCE PROGRAM**

#### **COVERAGE/LIMIT**

- ◆ Maximum benefit amount per covered injury is \$25,000
- ◆ Deductible: \$500 corridor per injury
- ◆ Excess to any other valid and collectible insurance available to insured person
- ◆ Benefit Period: 52 weeks from the date of injury
- ◆ Accidental Death, Dismemberment, or Loss of Sight Benefit: \$10,000
- ◆ Benefits include but not limited to:
  - Hospital
  - Surgical
  - Physician
  - Radiology
  - Ambulance
  - Dental (\$250 per tooth limit)

#### **WHO IS COVERED**

- ◆ All USA Cheer members, coaches and officials of High School and College STUNT teams

### **WHEN DOES COVERAGE APPLY**

- ◆ Regularly scheduled High School and College STUNT games, exhibitions and practices for regularly scheduled High School and College STUNT games. A coach or advisor must be present for all activities in order for coverage to apply.

## **CATASTROPHIC INJURY INSURANCE PROGRAM**

### **COVERAGE/LIMIT**

- ◆ Maximum Benefit Amount per covered injury \$500,000
- ◆ Deductible: \$25,000 reducing
- ◆ Excess to any other valid and collectible insurance available to insured person
- ◆ Maximum Benefit Period: 10 years from the date of injury
- ◆ Benefits include but not limited to:
  - Hospital
  - Combined Home Health Care and Custodial Care: \$100,000 per calendar year
  - Treatment of Mental or Nervous Disorders: \$90/visit, 1 visit/day, 50 visits/calendar year
  - Chiropractic: \$1,000 per calendar year
  - Outpatient Physical Therapy: \$25,000 per calendar year
  - Prosthetic (limitations apply)

### **WHO IS COVERED**

- ◆ All USA Cheer members, coaches and officials of High School and College STUNT teams

### **WHEN DOES COVERAGE APPLY**

- ◆ Regularly scheduled High School and College STUNT games, exhibitions and practices for regularly scheduled High School and College STUNT games. A coach or advisor must be present for all activities in order for coverage to apply.

USASFSC rules must be followed at all covered events.

All covered activities are limited to locations within the United States.