



## Health Insurance Information Form

LRCC provides Workers Compensation Insurance, which only covers job-related accidents. LRCC requires proof of health insurance prior to employment. If you do not have insurance that covers illness and non-job related injuries, you must secure insurance before camp begins.

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

Health Insurance Company \_\_\_\_\_

Policy Number \_\_\_\_\_

Effective Date \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Attach Copy Of Health Insurance Card Here: