



NSSI
is affiliated with
Worth Ave. Group

Print Application

Choose the Plan & Deductible You Want

(Check the box below for the coverage and deductible you want)

Replacement Cost Coverage Premium Table

WORLDWIDE COVERED LOSSES Accidental damage, theft, fire, flood, natural disaster and power surge due to lightning.			
Coverage Amount (Replacement Cost)	Annual Premium \$25 Deductible	Annual Premium \$50 Deductible	Annual Premium \$100 Deductible
\$2,000	<input type="checkbox"/> \$66	<input type="checkbox"/> \$61	<input type="checkbox"/> \$55
\$3,000	<input type="checkbox"/> \$83	<input type="checkbox"/> \$77	<input type="checkbox"/> \$72
\$4,000	<input type="checkbox"/> \$110	<input type="checkbox"/> \$105	<input type="checkbox"/> \$99
\$5,000	<input type="checkbox"/> \$138	<input type="checkbox"/> \$132	<input type="checkbox"/> \$127
\$6,000	<input type="checkbox"/> \$160	<input type="checkbox"/> \$154	<input type="checkbox"/> \$149
\$7,000	<input type="checkbox"/> \$182	<input type="checkbox"/> \$176	<input type="checkbox"/> \$171
\$8,000	<input type="checkbox"/> \$198	<input type="checkbox"/> \$193	<input type="checkbox"/> \$187
\$9,000	<input type="checkbox"/> \$215	<input type="checkbox"/> \$209	<input type="checkbox"/> \$204
\$10,000	<input type="checkbox"/> \$231	<input type="checkbox"/> \$226	<input type="checkbox"/> \$220

If you have a NSSI policy, please renew your existing policy. Do not apply for a new policy. For coverage amounts over \$10,000 or without Accidental Coverage, please call or go on-line.

STUDENT INFORMATION

(PLEASE TYPE OR PRINT)

*Required Fields

Student's Name* _____

School State* _____ College/University* _____

Classification* FR SO JR SR Grad Faculty/Staff

Parent/Guardian* _____

Parent/Guardian E-mail* _____
(This is where your policy declaration and booklet will be sent.)

Home Address* _____

City* _____ State* _____ Zip* _____ Home Phone* _____ Cell Phone _____

PAYMENT INFORMATION

Premium Amount (From the chart above)	\$ _____
Processing Fee*	\$ _____ 10.00
<small>*No processing fee for students attending college in the following states: AR, IN, MD, ME, NJ, RI & SD</small>	
Immediate Alert Option:	
Include 29.95	\$ + _____
WorthTrak:	
Include 9.95	\$ + _____
Total Amount Due	\$ _____

METHOD OF PAYMENT

Check/Money Order Enclosed (Make payable to NSSI)
 Charge to my Visa Master Card American Express Discover
 Acct. No. _____
 CCV# _____ Expiration Date _____ / _____

THE EFFECTIVE DATE IS 24 HOURS AFTER THE POSTMARK DATE.
 If you would like for the policy to start at a later date, what date? _____
***\$5.00 processing fee if ordering on-line.**

Policy Automatic Renewal - Make sure my policy doesn't expire! Please Automatically Renew my Student Protection Plan and additional optional memberships next year.

Mail completed application to: *National Student Services, Inc.* – PO Box 2137 – Stillwater, OK 74076