

# SAMPLE

## 2018 Illinois FFA Leadership Camp Signature Form & Insurance Card Upload

Please have your child & the parent/guardian sign below after reading the Camp Participation Agreement.

*I/We have read the Camp Participation Agreement and agree to all terms written in the agreement.*

Jane Doe  
Printed Name  
(Child)

Jane Doe  
Signature

5-1-18  
Date

John Doe  
Printed Name  
(Parent or Legal Guardian)

John Doe  
Signature

5-1-18  
Date

### INSURANCE CARD

After completing above, please write the information that is listed on the back of the insurance/medical card on the lines below, and then place the front of the insurance card below the written information, and take a picture with your phone, or scan the completed form to your computer. Please then upload to your child's health profile on the Caboodle Registration website.

If you do not have insurance, please write "no insurance", get the proper signatures above, and then take a picture of this form on your phone, or scan/email it to your computer to upload it to your child's health profile on the Caboodle Registration website.

Phone Number \_\_\_\_\_  
Address \_\_\_\_\_  
Website \_\_\_\_\_

**Please place the front of the insurance card below, and take a picture, or scan this completed form to yourself for upload to the Caboodle Registration website. Only one page can be uploaded to the Caboodle website.**

UnitedHealthcare **USbank**

Health Plan (80840) [REDACTED]

Member ID: [REDACTED] Group Number: [REDACTED]

Member: [REDACTED]

[REDACTED] Payer ID [REDACTED]

Copays: ER: \$150

UnitedHealthcare Choice Plus  
Administered by United HealthCare Services, Inc.