



STUDENT
AFFAIRS

Brown-Lupton Health Center

TCU
HEALTH CENTER
Keeping Horned Frogs Healthy
817.257.7279 FAX
817.257.7940 PHONE

Return this form to the TCU Health Center
Mail: TCU Box 279400, Fort Worth, TX 76129
Fax: 817.257.7279
E-mail: healthcenter@tcu.edu

Summer 2017
ENROLLMENT FORM
Aetna Student Health Insurance

Cost of Summer Semester is \$658.00. This amount is billed to your student account once this form has been returned to the Health Center. In order to complete the enrollment process, this form must be received by the second day of the summer session for which you have registered.

Name _____ M_ F____ Date of Birth ____/____/____

Social Security Number ____-____-____ TCU ID: _____

Address _____ City _____ State ____ Zip _____

Phone(____) _____ Undergraduate ____ Graduate ____

Signature _____ Date _____

Session I – Students registered for this summer session AND enrolled in the Aetna Student Health Insurance will have coverage that begins **May 15, 2017**, and ends **August 14, 2017**.

Session II – Students registered for this summer session AND enrolled in the Aetna Student Health Insurance will have coverage that begins **June 5, 2017**, and ends **August 14, 2017**.

Session III – Students registered for this summer session AND enrolled in the Aetna Student Health Insurance will have coverage that begins **July 10, 2017**, and ends **August 14, 2017**.