



# International Campers

## Additional Information & Insurance



**Accepted Methods of Payment:** All fees must be paid in U.S. dollars, using one of the following methods of payment:

- **Check** in U.S. Dollars drawn by a U.S. bank, payable to The Seed at Camp Netimus.
- **Visa, American Express, or MasterCard.** To pay by credit card, do so in your Camp In Touch portal.
- **Wire Transfer of Funds** is available. Please contact the office for details ([arthi@netimus.com](mailto:arthi@netimus.com)).

**Transportation arrangements:** Please make flight arrangements as soon as possible and confirm with the office **BEFORE** booking your flight. Please do not schedule flights to arrive to or depart from the US before 12PM - Noon. Confirm unaccompanied minor requirements and pay the fee to the airline in advance. Tell camp exactly what the airline requires for arrival and departure of an unaccompanied minor (all airlines are different). Camp will provide the name of the person picking up your child TWO days before arrival. Complete the transportation form in CampInTouch – **THIS FORM IS REQUIRED FOR ALL CAMPERS.** See page 3 of Transportation Packet for more details about air travel.

**Additional Fees:** All fees are listed on the camper application except for:

- \*Bank charges to transfer money
- \*Senior program additional spending

**Cell phone usage:** Although cell phones are not permitted at camp, you may send your daughter to camp with a cell phone for use during travel. Send a charger as well. Camper's phone will be stored in the office and returned fully charged upon departure.

**July 22<sup>nd</sup> – 23<sup>rd</sup> (Changeover Weekend):** If your daughter will be with us for Changeover Weekend, she may bring extra spending money for the Changeover Day Out (July 22<sup>nd</sup>). Any extra money **MUST** be kept in her camper envelope until needed for the weekend. Alternatively, you can add additional funds in her spending allowance via CampInTouch and let the office ([arthi@netimus.com](mailto:arthi@netimus.com)) know that you request her to be given extra spending cash.

**Out of Camp Trips:** Camp Netimus offers opportunities for campers to explore areas within a 4-hour proximity to camp. Most of these trips are of an outdoor nature (banana boating, canoeing, water skiing). Some trips go to neighboring states. For international campers, these trips are excellent opportunities to broaden their experience while in the United States. Trips are subject to change.

**Smoking of cigarettes and vapes is NOT permitted at camp for health and safety reasons.** Smoking materials will be confiscated if brought to camp. Any camper found possessing or using alcoholic beverages or illegal drugs will be dismissed from camp immediately with no refund of camp fee.

**Language:** Over the past 30 years, international campers and staff (some of the represented countries: England, France, Spain, Germany, Holland, Mexico, China, Ireland, Columbia, Czech Republic, Russia, Peru, New Zealand, Romania, Ukraine, Japan, Australia, Switzerland, Sweden, Morocco, Ecuador and Venezuela) have enjoyed camping at Netimus, and we feel highly qualified to provide an exceptional camp experience. We are confident that campers who are not native English speakers will greatly improve their ability to communicate in the English language. While campers are with us, we make every effort to ensure a warm and friendly environment where they can, with confidence, use and improve their English language skills. Tutoring is available - please inquire in advance.

## **International Accident Insurance**

Following is a summary of the principal terms and provisions of the Accident & Sickness Insurance Policy subscribed to by Camp Netimus. All international campers are **required** to purchase this policy for their stay at Camp Netimus. The cost for this policy is \$40.00 for the 2, 3, and 4-week sessions and \$60.00 for the 5 and 7-week sessions.

### **Description of Coverage:**

#### **Accidental Medical - Dental Expense Benefit**

The Insurance Company will pay benefits, up to the maximum amount selected by the Camp, minus the deductible, if an Injury requires the Insured Person to be treated by a physician and medical or dental expenses are incurred. The Insurance Company will pay benefits if any, for Usual and Reasonable Expenses deemed medically necessary for the covered Medical Expenses set forth below, with the provision that the first expense for such Injury is incurred no later than 26 weeks after the date of the accident causing the Injury. In the event of Injury to sound, natural teeth, the maximum Dental Expense Benefit shall not exceed \$1,000 for any one accident. No benefits will be paid under this section for loss due to Sickness.

#### **Sickness Medical Expense Benefit**

The Insurance Company will pay benefits, up to the maximum amount selected by the Camp, minus the deductible, if a Sickness requires the Insured Person to be treated by a physician and medical expenses are incurred. The Insurance Company will pay benefits, if any, for the Usual and Reasonable Expenses deemed medically necessary for the Covered Medical Expenses set forth below from the date Sickness begins. No benefits will be paid under this section for a loss due to Injury.

#### **Definition of Terms Used**

"Usual and Reasonable Expense" means an expense which: (1) is charged for treatment, supplies, or medical services deemed medically necessary to treat the Insured Person's condition; and (2) does not exceed the usual level of charges made for similar treatment, supplies or medical services in the locality where the expense is incurred. "Covered Medical Expenses" include charges for hospital, operating, and emergency rooms, and ambulatory surgical center, fees of physicians and nurses, medical expenses including anesthetics, ambulance service, artificial limbs and eyes, lab tests, prescriptions, prosthetics, radiation, physical therapy, transfusions and X-Rays, and dental care for treatment of sound, natural teeth when as a result of a covered Injury.

"Injury" means a bodily injury caused by an accident occurring while the Insured Person is covered under the Policy. The Injury must result directly and independently of all other cause of loss.

"Sickness" means a disease or illness which (1) is first diagnosed and treated while the Insured Person is covered by the Policy. A Sickness is considered to begin when a physician first diagnoses or recommends treatment for it and includes complications of pregnancy.

"Pre-existing Condition" means a condition for which an Insured Person received medical treatment, medicine or advice from a physician in the 12 months before the Insured Person's coverage took effect.

"Other Valid and Collectible Group Insurance" means all other valid and collectible group hospital, medical, dental or surgical insurance providing benefits for Covered Medical Services of the kind described in the Policy. Other Valid and Collectible Group Insurance shall include insurance provided in the form of services or cash payments, whether on an indemnity basis or on a provision of service basis, under any other group or blanket medical insurance policy, certificate or contract, hospital or medical service or group practice prepayment plan.

## **EXCLUSIONS**

The insurance under the Policy will not pay benefits for:

1. Intentionally self-inflicted injuries, suicide or any attempt at it, while sane;
2. Injury or loss sustained due to the use of alcohol or drugs unless taken under the advice of a physician;
3. Services or supplies not medically necessary for the diagnosis or treatment of a covered Injury or Sickness, which are not recommended and approved by the attending physician, or are in excess of the Usual and Reasonable Expense;
4. Expenses incurred for dental care, treatment, repair or replacement of sound natural teeth, except as provided under the Policy;
5. Expenses incurred for eye examinations, eyeglasses, contact lenses or hearing aids or the fitting, repair or replacement of these items (except for expenses of these items because of an Injury to the eye or ear, incurred while coverage is in effect);
6. Care, treatment or services provided by persons retained or employed by the Camp, or by any Insured Person's immediate family member; or for supplies, prescriptions or medicines paid for or reimbursable by the Camp, or for' which a charge is not made;
7. Expenses incurred for psychological or psychiatric counseling of any kind or any expense for treatment of nervous disease or disorders;
8. A Pre-existing Condition;
9. Injury resulting from riding or boarding or alighting from any aircraft (except regularly scheduled licensed aircraft);
10. Hernia, unless it results from a Covered Activity;
11. Personal comfort or convenience items including but not limited to telephone charges, television rental, and guest meals; or for items taken away or home from the hospital, including but not limited to crutches, wheelchairs, and walkers; or
12. Routine physical examination and related medical Services.