



How to Enroll in Your Group's Plan

- 1 Visit www.geobluestudents.com.
- 2 Look for **“Enroll in your school's or organization's group plan”** on the right side of the home page.

Find a Provider
Search thousands of healthcare providers.
[U.S. Providers »](#)

Hear from our global healthcare providers
[Watch now](#)

Students and Plan Members
[Enroll in your school's or organization's group plan](#)

Enter your self enrollment code
 [Submit](#)

- 3 Enter your Self Enrollment Code: **KXW-37937** and **click submit**.
- 4 Read the agreement that governs the terms of your eligibility. If you agree, click **“I agree.”**

Enrollment Acceptance Agreement

This plan is designed for and open to education abroad participants enrolled at Demo University.

I hereby certify that as the proposed participant, I will be attending an education abroad program in the current or immediately upcoming term. I further certify that I am not a citizen of my destination country or countries and that I am actively engaged in international education activities in the current or immediately upcoming academic term. Further, I understand that a participant whose coverage under this policy lapses shall be subject to all policy exclusions as of any subsequent effective date and I understand that the Company will pay benefits for Pre-Existing Conditions.

Verification of visa and academic enrollment documentation may be required at the time of claim submission.

I Agree Disagree

- 5 Click **“new”** and provide the required information.
- 6 If you have previously completed an online enrollment for this plan, please click **“renew”** and enter your Full Name and Date of Birth exactly as it appeared on your previous coverage.



How to Enroll in Your Group's Plan



- 7** Enter required information about yourself. Required information includes Name, Date of Birth, Gender, From Date, To Date, Email address, Mailing address, Home Country, Host Country.

Participant Information

Personal Information * Required Fields

Title*	<input type="text" value="Mr."/>	Gender*	<input checked="" type="radio"/> Male <input type="radio"/> Female
First Name*	<input type="text" value="First Name"/>	Date of Birth*	<input type="text" value="mm/dd/yyyy"/>
Middle Name	<input type="text" value="Middle Name"/>	TIN/SSN	<input type="text" value="XXX-XX-XXXX"/>
Family Name*	<input type="text" value="Family Name"/>		

Mailing Address

Address 1*	<input type="text" value="Address 1"/>	City*	<input type="text" value="City"/>
Address 2	<input type="text" value="Address 2"/>	Country*	<input type="text" value="-"/>
Address 3	<input type="text" value="Address 3"/>	State / Province	<input type="text" value="State/Province"/>
		Zip/Postal Code	<input type="text" value="Zip/Postal Code"/>

Contact Information

Email Address*	<input type="text" value="Email Address"/>	Phone	<input type="text" value="Phone"/>
----------------	--	-------	------------------------------------

- 8** Enter your credit card information.

Payment

Summary of Participant Information: **Mrs. Sam Smith**, 04/22/2000

Insurance Coverage: Participant Only; valid from 03/01/2019 through 04/01/2019.

Premium Amount:

Payment Details

Name on Card: *	<input type="text"/>
Card Number: *	<input type="text"/>
Expiration Date: *	<input type="text" value="MM"/> <input type="text" value="YYYY"/>
CVV Code: *	<input type="text"/>
Zip/Postal Code: *	<input type="text"/>

Click only once. Please wait for a confirmation page.

- 9** You will **receive a receipt via email** after your payment has been processed.

- 10** You will also receive a welcome email with instructions on **how to register on GeoBlueStudents.com and obtain your ID card and member guide.**



For assistance or questions regarding enrollment, please call GeoBlue at (888) 243-2358 and mention your Self Enrollment Code: KXW-37937