



## 2026 Fitness Benefit Insurance Reimbursement Request Form

Today's Date: \_\_\_\_\_

Member Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Salem State/Gassett ID#: \_\_\_\_\_

The Gassett Fitness Center follows Salem State University's wellness benefit requirements. You must meet the requirements below or your request will not be processed. If your insurance company's reimbursement requirements differ, you must specify these under special instructions.

- You may only submit one insurance reimbursement per membership plan per calendar year
- You must have been a member of your health plan for at least four months to be eligible for the rebate
- You must have been a member of the fitness center for at least four months to be eligible for the rebate
- You have until March 31, 2027 to file your reimbursement claim with your insurance provider

**If applicable, should spouse name be included on the plan? If yes, provide spouse name:**

\_\_\_\_\_

Please allow 5 business days for your letter to be processed. Letters will not be mailed. Your letter will be available for pick-up at the Gassett Fitness Center front desk. Completed forms should be submitted to [campusrec@salemstate.edu](mailto:campusrec@salemstate.edu) or the front desk of the Gassett Fitness Center.

**Special Instructions:**