



2019 Fitness Benefit Insurance Reimbursement Request Form

Today's Date: _____

Member Name: _____

Salem State ID#: _____

Gasset ID# (if applicable): _____

The Gasset 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, 2020 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 Gasset Fitness Center front desk. Completed forms should be submitted to Bethany Ross, Gasset Fitness Center Administrative Assistant.

Special Instructions: