

# ZIPCAR INSURANCE COVERAGE ACKNOWLEDGEMENT for 18-20 year olds at Tufts University

Applicant: (print name): \_\_\_\_\_

You are entering into a contract between yourself and Zipcar. Although this is an *independent* agreement and Tufts University is not a party to it, we want to ensure that you and your family have a clear understanding of the insurance coverage provided to Zipcar Members who are under 21 years of age. According to the Member Agreement, drivers under 21 years of age are covered only up to the state minimum mandated levels, which in Massachusetts are: Bodily Injury to Others - \$20,000 per person, \$40,000 per accident; Personal Injury Protection (PIP) - \$8,000 per person/per accident; Bodily Injury Caused By Uninsured Auto - \$20,000 per person, \$40,000 per accident; and Damage to Someone Else's Property - \$5,000.

***Tufts University is not, under any circumstances, providing any liability or physical damage insurance coverage for students, faculty or staff who rent from Zipcar for personal use and we strongly suggest you and/or your parent/guardian check with your private auto insurance carrier to see if your current policy provides any additional protection and/or to see if you can purchase additional protection.***

If you are an independent student employee (as you have previously reported to Tufts University) or employee, please signify that you understand this limitation in coverage by signing the section immediately below. If you are a dependent student, please sign the second section below and have your parent/guardian signify that they understand the limitations in coverage by having them sign this section as well. Once we have received all the completed membership application documents, including this form, we will forward your membership application to Zipcar. Please note Zipcar has a strict policy of checking applicants' driving records. Zipcar will approve or deny your application based on this record and Zipcar's other standard requirements.

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Independent student or employee acknowledgement: I understand the limitations in the Zipcar insurance coverage, agree to hold Tufts University harmless from any and all claims in using Zipcar for personal use, and still wish to submit my application for membership in the program.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Dependent student acknowledgement: I understand the limitations in the Zipcar insurance coverage, agree to hold Tufts University harmless from any and all claims in using Zipcar for personal use, and still wish to submit my application for membership in the program.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian acknowledgement: I understand the limitations in the Zipcar insurance coverage, agree to hold Tufts University harmless from any and all claims for the above named applicant in using Zipcar for personal use, have reviewed the program and the Member agreement and still wish to approve the above named applicant for membership in the program.

Print Name of Parent/Guardian: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_ Phone: \_\_\_\_\_

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AFTER SIGNING THIS ACKNOWLEDGEMENT FORM, PLEASE EMAIL TO: [zipcar@tufts.edu](mailto:zipcar@tufts.edu), or FAX to (617) 627-3392 or bring to the [TUPD administrative services window](#) on the first floor of Dowling Hall, Medford