

DISCLOSURE AND RELEASE

Virginia Polytechnic Institute and State University (“Virginia Tech”) is providing you this document to disclose to you its relationship with Income Protection Consultants, Inc., and David Brookbank. In addition, this document advises you about the risks associated in purchasing this or any other insurance product. By providing you with this document and disclosing to you the relationships and risks, Virginia Tech requests that you release Virginia Tech, the Commonwealth of Virginia and their agents and employees, from any claims and liability regarding any insurance policy for permanent and total disability and loss of value disability insurance coverage provided to you or purchased by you from Income Protection Consultants, Inc., its employees and agents, or David Bookbank and his employees and agents.

I, _____, an enrolled student-athlete at Virginia Tech acknowledge and agree to the following:

- I understand Virginia Tech is not affiliated in any way with Income Protection Consultants, Inc. and independent consultant, David Brookbank.
- I understand that Virginia Tech, Income Protection Consultants, Inc., and independent consultant, David Brookbank do not endorse any insurance company, insurance carrier, cover-holder or broker regarding disability coverage for Student Athletes enrolled at Virginia Tech.
- I understand that any insurance policy or coverage which I may apply for, purchase, or purchase on my behalf as an enrolled Student-Athlete at Virginia Tech has no financial benefit payable to Virginia Tech, Income Protection Consultants, Inc., and independent consultant, David Brookbank.
- I understand that any costs including premiums, and loan repayment of premiums made for on my behalf by Virginia Tech may be taxable to me as income in the year such payments are made.
- I understand that any taxes due on premiums or loan repayment of premiums paid on my behalf by Virginia Tech are my responsibility.
- I understand that any decision made regarding the purchase of Permanent and Total Disability and/or Loss of Value coverage for which I purchase, or which is purchased for me by Virginia Tech is solely my decision.
- I understand that Virginia Tech, Income Protection Consultants, Inc., and independent consultant, David Brookbank do not imply, warranty or guarantee that any benefit for Permanent and Total Disability and/or Loss of Value coverage which I may purchase and/or may be purchased on my behalf will be paid.
- I agree to hold harmless Virginia Tech, Income Protection Consultants, Inc., and independent consultant, David Brookbank, with regard to:
 - Information provided to me regarding Permanent and Total Disability and/or Loss of Value coverage
 - the application for insurance
 - purchase of insurance
 - claim payment
 - denial of claim payment
 - lack of claim payment

- I understand that Permanent and Total Disability and/or Loss of Value coverage has a very unlikely incidence of payment and that I am applying for coverage which may not pay a claim even in the event that I suffer an accident which leads to bodily injury, or develop an illness or sickness within the policy period.
- I understand that in the event of a claim I may be required to furnish all information as required by the insurance contract in order to file a claim and receive payment.
- I understand that I have the right to seek the advice of another consultant and purchase Permanent and Total Disability and/or Loss of Value coverage from whomever I may choose. I realize that I am responsible for the consultant's hourly rates and fees for such work should I choose to hire an individual to assist with a claim filing and payment.
- I understand that I have the right to decline the purchase of coverage, whether purchased by me or Virginia Tech.
- I have been given the opportunity to review this document with an adviser of my choice and I understand all the terms and that this is legally binding document.

 Student-Athlete Name (Print)

 Signature

 Date

 Signature of Witness

 Date