

For HR use only
Effective Date _____

COUNTRYWIDE

PRE-PAID LEGAL SERVICES, INC.

LEGAL WITH FINANCIAL WELLNESS AND PREMIER ID THEFT & CREDIT MONITORING PLAN ENROLLMENT FORM

SECTION 1 Legal Plan with Financial Wellness and Premier ID Theft & Credit Monitoring Plan

YES, I elect to enroll in the Group Legal Plan with Financial Wellness and Premier ID Theft Plan

Payroll Deduction is **\$18.33/month** which includes coverage for spouse/domestic partner and dependents up to the age of 26 for the Legal and Financial Wellness Plan and **Employee only coverage for the Premier ID Theft Plan.**

Payroll Deduction is **\$27.60/month** which includes coverage for spouse/domestic partner and dependents up to the age of 26 for the Legal and Financial Wellness Plan, **Employee + Spouse + Dependents over age 18 for the Premier ID Theft Plan.**

Payroll Deduction is **\$24.65/month** which includes coverage for spouse/domestic partner and dependents up to the age of 26 for the Legal and Financial Wellness Plan, **Employee + Spouse coverage for the Premier ID Theft Plan.**

SECTION 2

Employer:

Job Title:

Employee Name:

Home Phone:

Work:

Cell Phone:

Current address:

County:

City:

State:

ZIP Code:

E-mail:

SECTION 3

SPOUSAL INFORMATION

Name:

E-mail:

Employer:

Cell Phone:

Job Title:

SECTION 4

DEPENDENT INFORMATION

Name:

Name:

Name:

SECTION 5

Additional family members(s) over age 18 that I elect to enroll into the Premier ID Theft Plan

Spouse/Domestic Partner Name:

E-mail:

Name:

E-mail:

Name:

E-mail:

Name:

E-mail:

SIGNATURES

I have received the descriptive material for the Pre-Paid Legal Services and the ID Theft and Credit Monitoring Plans and chose to enroll in my selection above. Countrywide Pre-Paid Legal Services, Inc. may not cancel either plan or my membership without prior written notice to me. I understand that this plan will remain in effect until written notice is provided to Countrywide Pre-Paid Legal Services, Inc. I authorize my employer to deduct the membership fees to pay for the Group Legal Plan with Financial Wellness Plan and Premier ID Theft Plan from my paycheck for the payment of service plan fees, which will be forwarded to Countrywide Enterprises, Inc. (The amount of the deduction from each paycheck will be influenced by the frequency of payroll, whether you are paid weekly, semi weekly, bi-monthly).

Employee Signature:

Date:

Enroller:

Date: