



NATIONAL EMPLOYERS ASSOCIATION

A Non-Profit Association Founded in 1961
Membership Benefits Include:



DISCOUNT & SAVINGS PROGRAMS AND FAMILY KEYS PROGRAM PLUS

24 HOUR EMERGENCY ROOM COVERAGE FOR SICKNESS & ACCIDENT



\$1,000 PER EMERGENCY ROOM VISIT

Individuals - Families - Groups

Approved and underwritten by PRESIDENTIAL LIFE INSURANCE COMPANY, NYACK, NEW YORK in all states except NH & NJ
Policy Form AM 2007

The Dividend Club: National Employers Association members will earn dividends on Merchandise, Services, Travel & Entertainment when you shop from our On-Line Mall and make purchases. Choose from retailers such as Walmart.com, Target.com, BestBuy.com, CircuitCity.com, CompUSA.com, DisneyStore.com, OfficeMax.com, BrooksBrothers.com, Buy.com, EddieBauer.com, LizClaiborne.com, FOA.com, FOSSIL.com, HotelDiscount.com, JCrew.com, etc.

Family Keys helps organize the family's personal information with software that consists of three easy-to-use sections:
1. Key Financial Steps: Quickly helps to create records and to locate your important financial information. Prints reports and create a complete personal financial profile that is essential for developing financial plans. **2. Keys To Good Health:** Allows you to create complete and accurate health records for each family member, Invaluable when changing doctors. The genealogy category lets you trace prior generations health history. **3. Key Possessions:** A very convenient and easy way to inventory household property and validate ownership when filing and tracking Insurance claims, print police and insurance loss reports.

PLUS

All members and their qualifying dependents also receive the 24 Hour Emergency Room Coverage for Sickness or Accident.

Benefits are up to \$1000.00 per emergency room visit subject to a \$100 deductible per emergency room visit and limited to 2 claims per year, limits and maximums shown in the Certificate Schedule.

National Employers Association Enrollment Form

NEA Membership – Individual or Family \$20.00* per month
(add \$3.00 additional monthly fee if paying with Credit Card)
* Includes \$5.00 Monthly Administrative Fee

PMMI CODE # 88028

MEMBER

Male Female

_____		_____		_____	
Last Name		First Name		Middle Initial	
_____			_____		
e-mail Address			Occupation		
_____		/ /	_____		_____
Social Security Number		Age (max 69)	Date of Birth	Home Phone	Work Phone
_____			_____	_____	_____
Street Address			City	State	Zip Code

FAMILY MEMBERS (List spouse (max age 69) and dependent children to age 19 or full time students under age 25)

Name	Age	Date of Birth	Relationship	Social Sec. #	(Sex) M/F
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

I agree to the terms and conditions of NEA Membership as listed on the reverse side of this form.

_____		_____	
Member Signature		Date Signed	
_____		_____	
Representative Name (please print)		Representative #	Representative Phone #

See Reverse Side for Billing Options

