



NASW SENIOR TERM LIFE INSURANCE PLAN ENROLLMENT FORM

GROUP TERM LIFE INSURANCE CERTIFICATE
WITH GRADED DEATH BENEFIT

Underwritten by:

Hartford Life and Accident Insurance Company, Hartford, CT 06155



Complete and Return to:
NASW Assurance Services
Group Insurance Program Administrators
P.O. Box 26450
Phoenix, AZ 85068-9955

**ACCEPTANCE
GUARANTEED**

1. Please complete all information:

OFFICIAL MEMBER NO.:

Member Name (First, Middle Initial, Last):

Address:

City, State, Zip:

Phone Number: () - Email Address:

Date of Birth: / /
month day year

OFFICIAL MEMBER NO.:

SPOUSE/DOMESTIC PARTNER (First, Middle Initial, Last):

Address:

City, State, Zip:

Phone Number: () - Email Address:

Date of Birth: / /
month day year

2. Check the desired coverage:

MEMBER: \$10,000 COVERAGE INCREASE TO \$20,000 (if age 50-64)

SPOUSE/DOMESTIC PARTNER (if applying): \$10,000 COVERAGE INCREASE TO \$20,000 (if age 50-64)

3. Indicate beneficiary, and complete 4 and 5:

Member's Beneficiary (print full name):

Name:

Relationship: Percentage: %

Name:

Relationship: Percentage: %

Note: The Primary Insured will be the beneficiary of any Spouse/Domestic Partner coverage.

4. Please answer the question below:

By applying for this insurance, do you intend to replace, discontinue or change an existing policy of life insurance?

MEMBER: Yes No

SPOUSE/DOMESTIC PARTNER (if applying): Yes No

5. Please read carefully and sign and date below:

I /We hereby enroll with Hartford Life and Accident Insurance Company for coverage under the NASW Senior Term Life Insurance Plan with Graded Death Benefit. I/We certify that I/We am/are 50 through 74 and the above statements are full, complete, and true for each person to be insured, to the best of my /our knowledge and belief. I/We also understand that any misrepresentation contained herein or relied upon by the company may be used to contest the validity of the coverage, within the contestable period, if such misrepresentation materially affects acceptance of the risk.

I/We understand that coverage will become effective after the receipt of the first payment of premium. I also understand that, during the first two years of coverage, the benefit payable for death due to sickness will be the premiums paid plus interest. After two years of coverage, the benefit payable for death due to sickness will be the full benefit amount. At any time, the benefit payable for death due to accident will be the full benefit amount.

X _____
Member Signature (Required)

X ____ / ____ / ____
Date (Required) (month/day/year)

X _____
Spouse/Domestic Partner Signature (Required if applying)

X ____ / ____ / ____
Date (month/day/year)
(Required if requesting coverage)

In the event of any discrepancy between this document and the policy, the terms of the policy apply. Complete coverage information is in the certificate issued to each insured individual.

The Hartford® is The Hartford Financial Services Group, Inc. and its subsidiaries, including issuing company Hartford Life and Accident Insurance Company.
15-SRADTL-SRADTLS-UNDER65/OVER65-20/10-Q

Please mail your completed Enrollment Form in the enclosed postage-paid envelope to:
NASW Assurance Services Group Insurance Program Administrators, PO Box 26450, Phoenix, AZ 85068-9955



Underwritten by:
Hartford Life and Accident Insurance Company
Hartford, CT 06155

The Hartford® is The Hartford Financial Service Group, Inc., and its subsidiaries, including issuing company Hartford Life and Accident Insurance Company.

Just complete this enrollment form and return it today!

50-Plus Group Term Life Insurance Plan, designed especially for NASW members aged 50-74, offers group rates and a quick, convenient enrollment process.

Why not take a moment to see what your affordable group cost would be for this additional financial security?

-
- Enrolling couldn't be easier — there is **NO MEDICAL EXAM** required.
 - This is **Group Term Life** coverage.
 - You can **CONTINUE YOUR COVERAGE TO AGE 90** — regardless of changes in your health.
 - **NO SALES CALLS** — the entire enrollment process takes place through the mail or online.
-