

**NEA Complimentary  
Life Insurance  
(formerly DUES-TAB)**

- Up to \$1,000 in life insurance protection.
- Up to \$5,000 in regular accidental death and dismemberment benefits.
- \$50,000 in accidental death and dismemberment benefits that cover you while on the job or serving as an Association leader.
- \$150,000 in accidental death benefits for eligible members who are victims of death by homicide while at work.

**NEA Introductory Term  
Life Insurance  
For New Members Only**

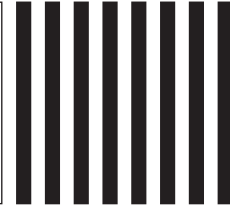
- Benefit began September 1, 2008.
- \$15,000 of term life insurance for 12 months—at no cost to the member.
- Eligible to continue at the end of the 12 month period at low members-only rates. Acceptance guaranteed.

FIRST FOLD IN THIRDS AND APPLY ADHESIVE STRIP HERE

**NEA  
Complimentary  
Life Insurance**

**NEA  
Introductory  
Term Life Insurance  
Exclusively for  
New Members**

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**BUSINESS REPLY MAIL**

FIRST-CLASS MAIL PERMIT NO. 1500 ANNAPOLIS JUNCTION, MD

POSTAGE WILL BE PAID BY ADDRESSEE

NEA MEMBERSHIP BENEFITS  
PO BOX 261  
ANNAPOLIS JUNCTION MD 20797-0140





# NEA Complimentary Life Insurance<sup>SM</sup> / NEA Introductory Term Life Insurance<sup>SM</sup> REGISTRATION FORM

These programs are provided at no cost to eligible members by the NEA Members Insurance Trust. To help us administer these programs, please complete this form in its entirety, then fold, seal and mail. No postage necessary.

MEMBER NAME—LAST															FIRST					MI
[Grid]															[Grid]					[ ]

RESIDENCE—STREET																													
[Grid]																													

CITY															STATE	ZIP
[Grid]															[ ]	[Grid] - [Grid]

PHONE		DATE OF BIRTH				SOCIAL SECURITY NUMBER (LAST 4 DIGITS)				Gender				
ARBA CODE	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	<input type="checkbox"/> Male	<input type="checkbox"/> Female

Home e-mail address <small>Please provide your home e-mail address to receive information and updates about NEA MB programs, Web Site offers and giveaways.</small>																													
[Grid]																													

**BENEFICIARY:** Please name your beneficiary:

LAST NAME															FIRST					MI
[Grid]															[Grid]					[ ]

BENEFICIARY ADDRESS—STREET																													
[Grid]																													

CITY															STATE	ZIP
[Grid]															[ ]	[Grid] - [Grid]

RELATIONSHIP (To Member)																													
[Grid]																													

BENEFICIARY E-MAIL ADDRESS																													
[Grid]																													

REMOVE THIS STRIP — AND SEAL

REMOVE THIS STRIP — AND SEAL

REMOVE THIS STRIP — AND SEAL

By signing this form, I am designating the beneficiary listed above for both plans as applicable. I understand that only first-year members are eligible for the NEA Introductory Term Life Insurance.

X

Member's Signature

Date

If a beneficiary is not named, any amount of insurance at your death will be paid to the first surviving beneficiary class as listed in the following order:  
1. Spouse 2. Children 3. Parents 4. Siblings 5. Estate

To name more than one beneficiary, call toll free 1-800-637-4636.

Number of children age 22 or younger dependent on you for support:  0  1  2  3  4 or more

Children's Year of Birth		1st Child	2nd Child	3rd Child	4th Child
[Grid]	[Grid]	[Grid]	[Grid]	[Grid]	[Grid]

**Marital Status**  
 Single  Married  Domestic Partner  
 Divorced/Separated/Widow

**Are you the major wage earner in the household?**  
 Yes  No

**Household Income Range?**  
 \$29,999 or below  \$70,000 - 99,999  
 \$30,000 - 39,999  \$100,000 - 124,999  
 \$40,000 - 49,999  \$125,000 - 149,999  
 \$50,000 - 59,000  \$150,000 and above  
 \$60,000 - 69,999

### ADDITIONAL REGISTRATION OPTION

- Go to [neamb.com/insurance](http://neamb.com/insurance) and register as an NEA Member.
- Click on "NEA Complimentary Life Insurance" to Name Your Beneficiary.

Of course, you can always Name Your Beneficiary by contacting the NEA Member Service Center toll-free at 1-800-637-4636, Monday-Friday from 8:00 a.m. to 8:00 p.m. (EST).

**Mail to: National Education Association  
PO Box 261  
Annapolis Junction, MD 20797-0140**