Membership Election Form

Employer Name

Benefit Effective Date: Paper applications must be received by the 20th of the month prior to the benefit effective date.

Service Features	LifeLock Benefit Elite	LifeLock Advantage™	LifeLock Ultimate Plus™
LifeLock Identity Alert* System*	✓	✓	V
Lost Wallet Protection	✓	✓	✓
Address Change Verification	✓	✓	✓
Reduced Pre-Approved Credit Card Offers	✓	✓	✓
Black Market Website Surveillance	✓	✓	✓
Live Member Service Support	✓	✓	✓
LifeLock Privacy Monitor™ Tool	✓	✓	✓
Identity Restoration Support	✓	✓	✓
\$1 Million Service Guarantee***	✓	✓	✓
Fictitious Identity Monitoring	✓	✓	/
Court Records Scanning	✓	✓	/
Data Breach Notifications	✓	✓	✓
Credit Card Activity Alerts [†]		✓	/
Checking and Savings Account Activity Alerts*		✓	✓
Online Annual Credit Report and Score		1 Credit Bureau	3 Credit Bureaus
Checking and Savings Account Application Alerts*			✓
Bank Account Takeover Alerts [†]	540		✓
Investment Account Activity Alerts*	✓		V
Credit Inquiry Alerts [†]	1		✓
Online Annual Tri-Bureau Credit Reports and Scores			✓
Monthly Credit Score Tracking			✓
File-Sharing Network Searches			✓
Sex Offender Registry Reports			✓
Priority Live Member Service Support			✓



Semi-Monthly Rates Shown Below	LifeLock Benefit Elite
☐ Employee (18 + Years Old)	\$4.25
☐ Employee + Spouse/Domestic Partner	\$8.49
☐ Employee + Children (Up to Age 25)*	\$7.43
☐ Employee + Family*	\$11.68
Semi-Monthly Rates Shown Below	LifeLock Advantage ^T
☐ Employee (18 + Years Old)	\$8.50
☐ Employee + Spouse/Domestic Partner	\$16.99
☐ Employee + Children (Up to Age 26)*	\$12.75
☐ Employee + Family*	\$21.24
Semi-Monthly Rates Shown Below	LifeLock Ultimate Plus
□ E-maile	\$12.75
☐ Employee (18 + Years Old)	\$25.49
☐ Employee (18 + Years Old) ☐ Employee + Spouse/Domestic Partner	
	\$18.06

Primary Account Holder:

Location:

Email:		me □Work □Other	Phone: (_ □ Home □ Work □ Cell
Address:		City:		State:	_ Zip:
DOB:/ Gender: 🗆 Male 🗆	l Female SSN:	Employee ID: _			
Signature:			Date:		
Note: By signing this form, you represent that you have the authority www.lifelock.com/terms on behalf of yourself and any other memb					
Dependents:*					
If selecting coverage for dependents, please co	mplete all fields below.				
Spouse/Domestic Partner Name:		□ Adult □ Minor	DOB://_	Gender:□M □F	SSN:
Phone:	□ Home □ Work □ Ce	l Email:			_ □ Home □ Work □ Other
Provide contact email and phone for dependen	ts if Adult box is checked for de	pendent.			
Dependent Name:		☐ Adult ☐ Minor	DOB://_	Gender:□M □ F	SSN:
Phone:	□ Home □ Work □ Cel	l Email:			_ ☐ Home ☐ Work ☐ Other
Dependent Name:		□ Adult □ Minor	DOB://_	Gender:□M □ F	SSN:
Phone:	□ Home □ Work □ Ce	I Email:			_ □ Home □ Work □ Other
Dependent Name:		□ Adult □ Minor	DOB://_	Gender.□M □F	SSN:
Phone:		Email:			□ Home □ Work □ Other
Dependent Name:		□ Adult □ Minor	DOB://_	Gender:□M □F	= SSN:
Phone:	☐ Home ☐ Work ☐ Ce	I Email:			☐ Home ☐ Work ☐ Other

Name:

No one can prevent all identity theft.

Life Leck does not monitor all transactions at all businesses.

Taktive dues not monor all transportions of an idealistical seasons and incomplete the specifically not minors, LifeLock Junior sensice. Enrollment in LifeLock service is limited to employees and treer eligible dependents. LifeLock Junior intermediate is a national membership to an adult LifeLock plan.

Genicle Guarantee centrals for State of New York members are provided uncker at Master Insurance Policy to State of New York members are provided under a Master Insurance Policy underwritten by United Specially Insurance Company, Linder the Service Guarantee Legislation to hire experts to help your recovery. Phase see the policy for terms, conditions and exclusions attributed comments.

