

Group Products  
Underwritten by Dearborn Life Insurance Company

Administrative Office: 701 E. 22nd Street, Lombard, Illinois 60148

New Enrollment  
  Change  
  Open Enrollment  
  COBRA  
  Retiree

## Employer/Employee Section

Enrollment forms must be submitted directly to Dearborn Life Insurance Company unless the group is self-administered. If the group is self-administered, submit enrollment forms to Dearborn Life Insurance Company only if evidence of insurability is required.

EMPLOYER		GROUP NO. / ACCOUNT NUMBER			LOCATION	
EMPLOYEE NAME - LAST	FIRST	MIDDLE INITIAL	SEX <input type="checkbox"/> M <input type="checkbox"/> F	DATE OF BIRTH	DATE OF HIRE (FULL TIME)	
SOCIAL SECURITY NO.		EARNINGS Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annual <input type="checkbox"/>		JOB TITLE	CLASS	
HOME ADDRESS				CITY	STATE	ZIP
HOME PHONE		WORK PHONE		CELL PHONE		
SPOUSE NAME - LAST (if Applicant)	FIRST	M.I.	SEX <input type="checkbox"/> M <input type="checkbox"/> F	SPOUSE DATE OF BIRTH	SPOUSE SOCIAL SECURITY #	
Has the Employee (if applying) used <b>any</b> tobacco products in the last 2 years?				<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Has the Spouse (if applying) used <b>any</b> tobacco products in the last 2 years?				<input type="checkbox"/> Yes	<input type="checkbox"/> No	

## BENEFIT SELECTION - Life & Disability & Critical Illness & Accident & AD&D

**COVERAGE SELECTION:** Your non-medical group insurance program may not include all the benefits listed below. **Ask your Employer for the details about the benefits available to you, your cost, if any, and whether you will be required to complete a health questionnaire.**

<b>Basic Coverage</b> (Check all that apply) Spouse includes Domestic Partner and Party to a Civil Union as defined in the Certificate.		
<input type="checkbox"/> Term Life / AD&D	<input type="checkbox"/> Short-Term Disability (STD)	<input type="checkbox"/> Long-Term Disability (LTD)
<input type="checkbox"/> Dependent Term Life / AD&D	<input type="checkbox"/> Critical Illness <input type="checkbox"/> Spouse <input type="checkbox"/> Child(ren)	<input type="checkbox"/> Accidental Death and Dismemberment (AD&D)
<input type="checkbox"/> Accident <input type="checkbox"/> Spouse <input type="checkbox"/> Child(ren) <input type="checkbox"/> Family		

<b>Supplemental Coverage</b> (Check all that apply)		(A)Add, (C)Change (D)Delete	Total Amount of Coverage Desired	If (C)hange, list Prior Coverage
Spouse includes Domestic Partner and Party to a Civil Union as defined in the Certificate.				
<input type="checkbox"/> Term Life / AD&D	Employee			
<input type="checkbox"/> Term Life / AD&D	Spouse			
<input type="checkbox"/> Term Life / AD&D	Child(ren)			
<input type="checkbox"/> Critical Illness	Employee			
<input type="checkbox"/> Critical Illness	Spouse			
<input type="checkbox"/> Critical Illness	Child(ren)			
<input type="checkbox"/> AD&D	Employee			
<input type="checkbox"/> AD&D	Spouse			
<input type="checkbox"/> AD&D	Child(ren)			

Dearborn Life Insurance Company's group insurance products are offered as Specialty Benefits in cooperation with Blue Cross Blue Shield of Michigan. Specialty Benefits group insurance products are issued by Dearborn Life Insurance Company, 701 E. 22nd St. Suite 300, Lombard, IL 60148.

Dearborn Life is a separate company and does not provide Blue Cross Blue Shield of Michigan products and is financially responsible for the products it issues.

Dearborn Life Insurance Company is an independent licensee of the Blue Cross and Blue Shield Association. Blue Cross Blue Shield of Michigan and Blue Care Network are nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association.

<b>Voluntary Coverage</b> (Check all that apply)		(A)Add, (C)Change (D)Delete	Total Amount of Coverage Desired	If (C)hange, list Prior Coverage
Spouse includes Domestic Partner and Party to a Civil Union as defined in the Certificate.				
<input type="checkbox"/> Term Life	Employee			
<input type="checkbox"/> Term Life	Spouse			
<input type="checkbox"/> Term Life	Child(ren)			
<input type="checkbox"/> AD&D	Employee			
<input type="checkbox"/> AD&D	Spouse			
<input type="checkbox"/> AD&D	Child(ren)			
<input type="checkbox"/> AD&D	Dependents			
<input type="checkbox"/> AD&D	<input type="checkbox"/> Employee <input type="checkbox"/> Family			
<input type="checkbox"/> Long-Term Disability (LTD): Incremental				
<input type="checkbox"/> Long-Term Disability (LTD): % of Earnings				
<input type="checkbox"/> Short-Term Disability (STD): Incremental				
<input type="checkbox"/> Short-Term Disability (STD): % of Earnings				
<input type="checkbox"/> Critical Illness	Employee			
<input type="checkbox"/> Critical Illness	Spouse			
<input type="checkbox"/> Critical Illness	Child(ren)			
<input type="checkbox"/> Accident	Employee			
<input type="checkbox"/> Accident	Employee + Spouse			
<input type="checkbox"/> Accident	Employee + Child(ren)			
<input type="checkbox"/> Accident	Family			

**BENEFICIARY DESIGNATION:** (For Employee Only: Must Be Completed if you have applied for Life or AD&D insurance.) If two or more primary beneficiaries are named, and you do not list benefit percentages, proceeds will be paid in equal shares to the named primary beneficiaries who survive you. If no primary beneficiary survives you, proceeds will be paid to the contingent beneficiary(ies). If you list benefit percentages, the total must equal 100%. (Employee is the beneficiary of proceeds from spouse or child coverage.)

First Name	Last Name	Social Security No.	Date of Birth	Relationship	Percentage
Primary					%
Primary					%
Contingent					%
Contingent					%

Dearborn Life Insurance Company's group insurance products are offered as Specialty Benefits in cooperation with Blue Cross Blue Shield of Michigan. Specialty Benefits group insurance products are issued by Dearborn Life Insurance Company, 701 E. 22nd St. Suite 300, Lombard, IL 60148.

Dearborn Life is a separate company and does not provide Blue Cross Blue Shield of Michigan products and is financially responsible for the products it issues.

Dearborn Life Insurance Company is an independent licensee of the Blue Cross and Blue Shield Association. Blue Cross Blue Shield of Michigan and Blue Care Network are nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association.

**COVERED SPOUSE AND DEPENDENTS**

Dependent Child(ren) over the age limit, indicate if Full Time Student (FTS) or Handicapped (HDCP).

First Name	Last Name	Social Security Number	Date of Birth	Relationship	SEX	Adult Child FTS or HDCP	Name of Accredited School
					<input type="checkbox"/> M <input type="checkbox"/> F		
					<input type="checkbox"/> M <input type="checkbox"/> F		
					<input type="checkbox"/> M <input type="checkbox"/> F		
					<input type="checkbox"/> M <input type="checkbox"/> F		
					<input type="checkbox"/> M <input type="checkbox"/> F		
					<input type="checkbox"/> M <input type="checkbox"/> F		

I hereby request to be insured and authorize deductions, if any, from my compensation for my share of the cost of the benefits to which I may be entitled under the group policy (ies) issued to the Employer listed above. I understand that if I am not actively at work on the effective date of my coverage, my insurance will not begin until the day I return to work. I understand that if I do not remain actively at work that my coverage may lapse or terminate. For those coverages I have declined, I understand that if I choose to enroll at a later date, my cost may be higher and a health questionnaire may be required.

FOR DEARBORN LIFE  
INSURANCE COMPANY  
USE ONLY

EMPLOYEE SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**Waiver of Coverage:**

I DO NOT WISH TO ENROLL at this time and understand that the opportunity to enroll at any future time will be subject to such arrangements as may be made with the company.

EMPLOYEE SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

Dearborn Life Insurance Company's group insurance products are offered as Specialty Benefits in cooperation with Blue Cross Blue Shield of Michigan. Specialty Benefits group insurance products are issued by Dearborn Life Insurance Company, 701 E. 22nd St. Suite 300, Lombard, IL 60148.

Dearborn Life is a separate company and does not provide Blue Cross Blue Shield of Michigan products and is financially responsible for the products it issues.

Dearborn Life Insurance Company is an independent licensee of the Blue Cross and Blue Shield Association. Blue Cross Blue Shield of Michigan and Blue Care Network are nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association.