

LegalShield | IDShield Member Enrollment

- First Name _____ Last Name _____
- Street Address _____
- City _____ State _____ Zip _____
- Best Phone _____
- Date of Birth _____
- Best email address _____
- Membership Last 4 digits SS# _____ Assoc Full SS# _____
- Spouse/Significant Other _____ Last Name _____
- Spouse Date of Birth _____
- Spouse email address _____

1) Bank Draft & Direct Deposit Information - Checking – Savings Bank Name _____

- Account number _____
- Routing number _____ (9 digits)

2) Credit Card (circle one) Visa - MC - Discover – AMEX

- Credit Card Number _____
- Expiration Date ____ / ____ 3 Digit Security Code ____ (4 for AMEX) ____

(Circle all that apply) **Monthly or Annually?**

Legal Plans: Basic 29.95 **Preferred 37.95** Premium 49.95:

IDShield Couple/Family **34.95** (3B): Individual: **19.95** (3B): Assoc Fee 49.00

Preferred LegalShield **37.95** + (Ind) IDShield **19.95** = **57.90**

Preferred LegalShield **37.95** + (Couple or Family) IDShield **34.95** = **72.90**

Preferred LegalShield **37.95** + **14.95** for Biz Add On = **52.90**

Preferred LegalShield **37.95** + **\$99.00 Assoc** = **136.95**

Preferred LegalShield **37.95** + (Ind) IDShield **19.95** + **\$99.00 Assoc** = **156.90**

Preferred LegalShield **37.95** + (Couple or Family) IDShield **34.95** + **49.00** = **171.90**

Agent Name _____ Agent Number _____