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| https://www.gacquote.com/images/home_header_logo_agent1.png |   |
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|   Agent Name: John Sullivan  | Phone: 281-333-4829 | Email: john-marysullivan@nassaubayagency.com |

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|  | Applicant Information | Verify Applicant Information | Dependent Information | Medical Questionnaire | Payment Options | View Application Form |

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| **Selected Plan:** NEA 24 Hour Accident Coverage - $5,000 Coverage |

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|  https://www.gacquote.com/images/bullet_sq.jpg **Thank You** |
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| **Other Plans and Memberships Available for you and your family through various carriers and associations:** |
|    GAC Quote [**Value Med Plan**](http://www.gacquote.com/quote/quote_result.php?quote=MedPlan&ApplicantID=73864&AgentID=8121&Prev_Plan=19&code=f81d55ce8d46cfab4b642aa4110a8f9b) |
|    GAC Quote [**24 Hour Accident Coverage**](http://www.gacquote.com/quote/quote_result.php?quote=24hour&ApplicantID=73864&AgentID=8121&Prev_Plan=19&code=f81d55ce8d46cfab4b642aa4110a8f9b) |
|    GAC Quote [**CallMD**](http://www.gacquote.com/quote/quote_result.php?quote=CallMD&ApplicantID=73864&AgentID=8121&Prev_Plan=19&code=f81d55ce8d46cfab4b642aa4110a8f9b) |
|    GAC Quote [**AHIR Membership with Accident Coverage**](http://www.gacquote.com/quote/quote_result.php?quote=nea_ac&ApplicantID=73864&AgentID=8121&Prev_Plan=19&code=f81d55ce8d46cfab4b642aa4110a8f9b) |
|    GAC Quote [**MyMD ASAP**](http://www.gacquote.com/quote/quote_result.php?quote=MyMD%20ASAP&ApplicantID=73864&AgentID=8121&Prev_Plan=19&code=f81d55ce8d46cfab4b642aa4110a8f9b) |

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| **Your quote includes the FAMILYYour Initial Monthly cost is: $44.95 and Monthly cost thereafter is: $44.95**  |
| Thank you for requesting membership in the NEA 24 Hour Accident Coverage.  You will receive the fastest and most courteous service available. We will stay in touch with you throughout the process and you will promptly be notified if any additional information is required.If your membership is approved and the payment is processed by NEA, your membership will not go into effect until the 12:01 am on the 1st day of next month. If payment is not received, your membership will be considered void and it will not be issued. * Your Membership Enrollment has been submitted to NEA via GACQUOTE.com
* You will be receiving an email confirmation of your submission.
* Below is your NEA membership kit, certificate of coverage and I. D. cards.You will also receive in the mail confirmation that your membership is in effect.
* You are required to print or save your enrollment and NEA package through the links below.
* You can print the documents when they open in a new window by clicking CTRL + P (or CMD + P on Macs)
* If you have trouble printing or downloading your documents, you may contact newsales@gacquote.com for assistance.
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| [View Application](https://www.gacquote.com/quote/thankyou.php)  |

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| **Please click on the links below to print your plan documents and fulfillment**  |

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| [Welcome letter and ID Cards](https://www.gacquote.com/quote/mapfields.php?AgentID=8121&ApplicantID=73864&plan=19&PDF_type=IDCard&pdf_name=NEALetter.pdf)  | Member Benefit Guide | [Certificate of Coverage](http://www.gacquote.com/PDF/NEAAccident/Certificate_of_Coverage/5000_NEA_Generic.pdf) |

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| **NEA Terms and Conditions** **1**. Member understands that NEA is not an insurance company or program. Accident Benefit Payments are made by the administrator for the insurance company issuing the blanket coverage to Members.**2.** NEA provides savings to its members on services through a number of sources. The current list of benefits may be modified through additions or deletions. A quarterly newsletter, posted on our website or sent via e-mail, will keep Members up to date on benefits and other pertinent information.**3.** Payments for the NEA Program are due in advance. Payments will be drafted on or about 15 days before the due date. If you choose to cancel your program, it is your responsibility to make sure that your membership card and a written request for cancellation are sent to NEA at least 15 days prior to the anniversary of your effective date in order for your account not to be charged for additional fees.**4.** Member hereby appoints, National Employers Association (NEA) President, or failing this person, a NEA Director, as proxy holder  for and on behalf of the member with the power of substitution to attend, act and vote for and on behalf of the member in respect of all matters that may properly come before the meeting of the members of NEA and at every adjournment thereof, to the same extent and with the same powers as if the undersigned member were present at the said meeting, or any adjournment thereof. Annual meetings are to be held in Arizona the second Tuesday of August.**5.** NEA reserves the right to terminate any enrollment or deny eligibility in the program for lack of payment to NEA. Returned checks, insufficient notices on bank drafts or denial by the member’s credit card company for payment of the membership fee is deemed to be evidence of non-payment by a member. There will be a $10.00 charge to be reinstated in the program after such denial.  If reinstatement for non-payment happens more than once, a $20.00 reinstatement will apply.**6.** In the event of any dispute, member agrees to resolve said dispute solely by binding arbitration that shall be governed by the laws of the state of Arizona and enforceable at Scottsdale, Maricopa County.**7.** Membership canceled within the first 30 days of the enrollment date may be eligible for refund if the membership card and written cancellation request are sent to NEA. The administrative fee is not refundable. Approved refunds will be processed approximately 30 days after cancellation.**8.** Membership is effective on the 1st of the month following enrollment acceptance by NEA.**Member Agreement:**  By signing the enrollment form on online, Member expresses desire to become a member of National Employers Association. Member acknowledges that the discount plans ARE NOT INSURANCE, but membership includes certain limited supplemental insured coverage's. Membership benefits are not a replacement for health insurance coverage nor are they intended as a substitute for health insurance coverage. Membership fees may change for all members, but not individually, with notification. ***Discount Benefits Are Not Insurance*** If you have any questions please call 1-800-366-2467or E-mail newsales@gacquote.com Sincerely, General Agent Center  |

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