SYMETRA
RETIREMENT | BENEFITS | LIFE

Symetra Life Insurance Company
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Mailing Address: Benefits Division | PO Box 34690 | Seattle, WA 98124-1690
Phone 1-800-426-7784 | Fax 1-866-348-0058 | TTY/TDD 1-800-833-6388

GROUP LIFE INSURANCE ENROLLMENT

TO BE COMPLETED BY THE POLICYHOLDER

Policy Number 01-016283-00

Employer/Policyholder Name Health Options for Public Entities Joint Self-Insurance Risk Pool Association

c/o Snedeker Risk Mgmt., 400 W. Main St. | Havana | IL | 62644
Street Address | City | State | Zip Code

Employee Occupation/Job Title ____________ Employee Date of Employment ____________

Same as Effective Date under HOPE Trust Health Care Plan
Effective Date of Coverage

☒ Full Time Employee ☐ Part Time Employee

$ N/A / ~~☐ HR ☐ WK ☐ MO ☐ YR~~
Basic Earnings

1
Class Number (if applicable)

I. EMPLOYEE/ENROLLEE INFORMATION

Name ____________ Sex ☐ M ☐ F

Street Address ____________ City ____________ State ____________ Zip Code ____________

Home Telephone Number ____________ Date of Birth ____________ Marital Status ____________

II. BENEFITS (Please check if you wish to enroll)

	Yes	No	Indicate the benefit amount
Employee Life	X		$15,000
Employee AD&D	X		$15,000

III. BENEFICIARY DESIGNATION

Primary Beneficiary: The person or persons you want to receive the life insurance benefit if you die. If more than one primary beneficiary has been named, and the specific percentage has not been designated, then each will receive an equal share of the benefit.

Contingent Beneficiary: The person or persons you want to receive the life insurance benefit if you die and if no primary beneficiary is alive on that date. If more than one contingent beneficiary has been named, and the specific percentage has not been designated, then each will receive an equal share of the benefit.

	NAME	ADDRESS	DATE OF BIRTH	RELATIONSHIP	% OF BENEFIT
☐ Primary ☐ Contingent					
☐ Primary ☐ Contingent					
☐ Primary ☐ Contingent					
☐ Primary ☐ Contingent					

Enrollee/Employee Signature ____________ Date Signed ____________

Group Benefits are insured by Symetra Life Insurance Company.