



IOWA STATE POLICE ASSOC. TEAMLEGAL GROUP LEGAL DEFENSE ENROLLMENT FORM



(Please Print)

ANNUAL GROUP RATES:	
50% or more participation	
<input checked="" type="checkbox"/> Criminal & Civil Only	\$96.00*
<input type="checkbox"/> Telephone Consultation Program	\$39.00
Total: \$135.00	
NOTE: ALL PRICES SHOWN ABOVE ARE ANNUAL. * Includes \$10.00 Membership Fee.	

*Name: _____

*Phone: () _____

*Address: _____

*City: _____ *State: _____ * Zip: _____

* Email: _____

*Social Security# (Last 4 digits only): _____ *Date of Birth: _____

Name of Employer: _____ Position: _____

Years with Current Employer: _____ Other Professional Affiliations: _____

I hereby apply for enrollment in the PLEA Legal Defense Fund and Participation in the PLEA Trust. I agree to abide by all terms and conditions thereof. I understand that no coverage is in effect until this application is approved by the Plan Administrator. To my knowledge, I am not presently named in any suits, actions, or proceedings, nor under investigation for a duty-related incident, except the following for which there would be no coverage under Plan: _____

I have read, understand and agree to the terms and conditions of the Legal Defense Summary Plan Description.

Signature: _____ Date: _____

Complete, sign and mail your completed Enrollment Form along with payment to: PLEA ♦ P.O. Box 1197 ♦ Troy, MI 48099-1197. Checks made payable to: PLEA. Should you have any questions, please call 248-588-8989, Ext. 1002.



To pay by Visa, MasterCard, Discover or American Express, please visit our website @ www.plea.net and choose TeamLegal and complete the form. Group Discount Code is I-IOWAS.

Legal Defense coverage includes the following at NO additional cost to you:

- ✓ HR 218 - Plan A.
- ✓ \$5,000 Accidental Death & Dismemberment coverage (24 hour, on and off duty).

To Receive the included AD&D Coverage you must fill out the form below:

*Beneficiary Name: _____

*Relationship: _____

*Signature: _____ *Date: _____

CHOICE OF COUNSEL

The Participant has the free and unrestricted right to employ an attorney of his or her choice. The Plan has no obligation to recommend counsel and is not a guarantor in any manner of the skill of counsel chosen by participant, even if the attorney is a Participating Attorney.

The Plan does not guaranty the availability of a Participating Attorney in the Participant's geographical area. This may result in the Participant's need to hire a Non-Participating Attorney at added expense to the Participant. The Plan is not obligated to pay for the costs of a Non-Participating Attorney except as set forth in the Schedules of Benefits in the Plan Description.