



TWU LOCAL 100 VISION BENEFITS ENROLLMENT/CHANGE FORM

INCOMPLETE FORMS WILL NOT BE PROCESSED

MEMBER INFORMATION

☐ New Enrollment

☐ Change

Last Name _____	Address _____
First Name _____	City _____
Middle Name _____	State _____ Zip Code _____
Contact Phone _____	BSC # _____ Date Appointed _____
D.O.B. _____	Email Address _____

GENDER ☐ Male ☐ Female

MARITAL STATUS ☐ Single ☐ Married ☐ Domestic Partnership ☐ Divorced/Widowed

Spouse, Domestic Partner & Unmarried dependent Children. Dependents are covered to age 26. Dependent eligibility is governed by your group's contract.

☐ Add ☐ Remove

Last Name _____
First Name _____
D.O.B. _____

GENDER ☐ Male ☐ Female

RELATIONSHIP ☐ Spouse/D.P. ☐ Child

☐ Add ☐ Remove

Last Name _____
First Name _____
D.O.B. _____

GENDER ☐ Male ☐ Female

RELATIONSHIP ☐ Spouse/D.P. ☐ Child

☐ Add ☐ Remove

Last Name _____
First Name _____
D.O.B. _____

GENDER ☐ Male ☐ Female

RELATIONSHIP ☐ Spouse/D.P. ☐ Child

☐ Add ☐ Remove

Last Name _____
First Name _____
D.O.B. _____

GENDER ☐ Male ☐ Female

RELATIONSHIP ☐ Spouse/D.P. ☐ Child

In order for TWU-Local 100 to complete the processing of your benefits, you must provide us with copies of the following documents:

- Marriage certificate for spouse
- Birth certificate for all dependents
- Social Security cards for all dependents
- Adoption/Legal Guardianship papers for dependent children

Any person who knowingly and with intent to defraud any statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent act, which is a crime, and shall also be subject to a civil penalty. **Vision benefits will be effective 90 days after hire date.**

I agree to be liable for any claims presented and paid as a result of such fraudulent act.

Signature _____

Date _____

RETURN COMPLETED FORM TO: Transport Workers Union, Local 100
195 Montague Street, 3rd Floor, Brooklyn, NY 11201
Email: memberservices@twulocal100.org
Fax: 347.643.8063

**INTERNAL
USE**

TWU Local 100 Effective Date _____

☐ Termination