

LegalShield Plan Coverage:



- **Dedicated Law Firm-**
- **Direct access, no call center**
- **Advice and Consultation-**
Phone consultations with your law firm for any personal legal matter, even pre-existing
- **Letters/Phone Calls-**
Made on your behalf to help resolve personal legal matters
- **Document Review-**
Your provider law firm will review personal documents (up to 15 pages each)
- **Residential Loan Document Assistance-**
For the purchase of your primary residence
- **Income Tax Audit Services-**
Receive representation if audited by the IRS on your personal tax return
- **Civil Trial Defense-**
When named defendant in a covered civil lawsuit
- **Uncontested Divorce**
- **Uncontested Separation**
- **Uncontested Adoption**
- **Uncontested Name-**
Available 90 consecutive days from your effective date
- **25% Preferred Member Discount-**
for additional legal services
- **24/7 /365 Emergency-**
for covered legal situations
- **Auto Related Property Damage Collection-**
- **Drivers License Assistance-**
- **Deadly Auto Accident Lawsuit Defense-**
for You & All Covered Family Members
- **Will**
- **Physician's Directive and**
- **Living Will**
- **Financial or**
- **Durable Power of Attorney-**
For All Covered Family Members

IDShield Plan Coverage:



General

- 24/7 Emergency Assistance
- Identity Consultation
- Identity Insights and Tips
- Live Member Support
- Monthly Credit Score Tracker
- Lost/Stolen Wallet Assistance
- Medical Data Reports

Alerts

- Credit Threat Alerts
- Hard Credit Inquiry Alerts

Financial

- Credit Freeze and Fraud Alert Assistance
- High Risk Application and Transaction Monitoring
- Identity Fraud Protection Plan \$3M

Monitoring & Detection

- Address Change Monitoring
- Auto Monitoring
- Continuous Credit Monitoring
- Court Records Monitoring
- Dark Web Internet Monitoring
- Payday Loan Monitoring
- Personal Internet Monitoring
- Public Records Monitoring
- Sex Offender Monitoring
- Sex Offender Search
- Social Media Monitoring
- Telecom Monitoring
- Child Monitoring- With our Family Plan

Restoration

- Dedicated Licensed Private Investigators
- Full Service Restoration
- Restoration Verification
- Unlimited Service Guarantee

Coverage	Individual Monthly	Family Monthly	For More Information
LegalShield	\$18.95	\$18.95	Contact Your Representative: Alicia Ward 817.607.8868 or alicia@aliciaward.com Visit Your Legal/IDShield Site:  shieldbenefits.com/gormanisd
IDShield	\$8.95	\$18.95	
LegalShield + IDShield	\$27.90	\$33.90	

Save \$ with these incredible MEMBERPERKS

Your LegalShield and IDShield Memberships are simply amazing. In addition to the privileges that are already yours, we have added these MEMBERPERKS with hundreds of merchants and thousands of discounts. Members can access savings at both national and local companies on everyday purchases such as tickets, electronics, apparel, travel and more. Members have the opportunity to save, on average, over \$2,000 per year.

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& INSURANCE PROTECTION
SERVICES



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REAL ESTATE & MOVING
SERVICES



SPORTS & OUTDOORS



TICKETS & ENTERTAINMENT



TRAVEL

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— Martha S.

"I saved 20% at Advance Auto and I also saved 30% on movie tickets on date night with my wife. This membership is it!"

— Andre E.

"I saved hundreds of dollars on a new laptop."

— Anna W.

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MAJOR LEAGUE BASEBALL

**AND MANY
MORE!**

Getting Started

To sign up, simply log in at legalshield.perkspot.com. If you don't already have an account, follow the simple on-screen instructions to make an account with your personal or work email and LegalShield Membership number.

These benefits are for LegalShield and IDShield Members. All offers or promotions are subject to change without notice.

ENROLLMENT FORM



Name: _____ Employer: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Personal Phone #: _____ Personal Email: _____

Last 4 SSN: _____ Date of Birth: _____

Dependent Information:

Spouse- Name: _____ DOB: _____

Dependents- Name: _____ DOB: _____

Name: _____ DOB: _____

Name: _____ DOB: _____

Plan Type: (choose (X) plan type & coverage level you are interested in)

LegalShield- Individual _____ Family _____

IDShield- Individual _____ Family _____

LegalShield + IDShield- Individual _____ Family _____

I hereby authorize my employer to deduct _____ **per pay period** from my earnings for my LegalShield and subsidiaries membership and to remit such amount directly to LegalShield. I agree that the company will not be responsible or liable for my decision to purchase the LegalShield membership or the services provided through my membership and that company's sole responsibility is to withhold and pay my membership fee to LegalShield.

_____ I wish to opt out of these benefits.

Signature: _____

Date: _____

Complete and return to: encyro.com/aliciaward