

LegalShield/IDShield Member Enrollment

First Name _____ Last Name _____ Date _____

Address _____ City _____ State _____ Zip _____

Best Phone _____ Best Email Address _____

Date of Birth ____/____/____ SS# Last 4 Digits _____

Spouse/Significant Other

Spouse First Name _____ Spouse Last Name _____

Spouse Date of Birth ____/____/____ Spouse Email Address _____

Dependent Children / Authorized Users (Business Plans)

Name _____ DOB ____/____/____ Title _____

Name _____ DOB ____/____/____ Title _____

Name _____ DOB ____/____/____ Title _____

Name _____ DOB ____/____/____ Title _____

Name _____ DOB ____/____/____ Title _____

Account Setup

User Name _____ Password _____

Bank Draft Bank Name _____ Routing # _____ Account # _____

Credit Card Card # _____ - _____ - _____ Exp. Date ____/____ Security Code _____

Plan(s) Ordered

LegalShield

LegalShield \$29.95 Biz Supplement \$14.95 Gun Owner Supplement \$14.95 Rideshare Supplement \$14.95

IDShield

Family 1B \$29.95 Family 3B \$34.95

Individual 1B \$14.95 Individual 3B \$19.95

Business

Essentials \$49.95 Plus \$99.95 Pro \$169.95 Litigation Supplement \$14.95

IDShield for Business

Essentials \$79.95 Plus \$169.95