

## Membership Enrollment Form

Membership is only \$60 a year and is billed annually.

Included in your membership is 1 FREE NYSBG Wellness Package (see page2).



### NYSBG Member Benefits

The NYSBG Member Benefits apply to you, your employees, and their dependents (unless otherwise indicated) as part of your annual NYSBG dues of \$60 per year. NYSBG may add or remove membership programs without notice. Visit [www.nysbg.com](http://www.nysbg.com) for updates.

- ♦ 1 Free NYSBG Wellness Package that includes a \$25,000 Accidental Death & Dismemberment policy (ages 64 and under) and discount plans for Dental, Vision, Hearing, Prescriptions, and Holistic Medicine.
- ♦ Free Listing in the NYSBG On-line Member-to-Member Discount Directory. Offer discounts on your goods or services to fellow members and take advantage of other member offers.
- ♦ Starter Website Package for \$799.00 through Visionary Marketing, Inc. A three-section, 6-page website with stock images, search engine submission, and keyword integration included. 12 professional themes as well as color choices. (Hosting, copywriting, digital photography, e-mail accounts, on-line control panel, site traffic reports, and domain name registration available at additional costs).
- ♦ 5% membership discount off insurance rates for your pets through Veterinary Pet Insurance. Endorsed by the American Humane Association. Discount applies to base plan only. No other discounts apply.
- ♦ For office and document support, or reliable and cost-effective shipping, NYSBG members can save up to 26% on select FedEx® shipping and business services. There are no costs and no minimum shipping, copy or print requirements.
- ♦ Discounted less-than-truckload (LTL) shipping with Roadway Express, Inc. Receive 52% off E-Z Rate tariff for standard LTL and guaranteed services.
- ♦ Discounted car rental rates and upgrade coupons through Avis®, Hertz®, and Alamo®.
- ♦ Closing cost discounts up to \$1,300 (depending on the size of the mortgage) and a 2-year rate-lock on new construction from Wells Fargo Home Mortgage.
- ♦ Total Move - Moving Services program for home buyers. Receive competing van line quotes from nationally recognized carriers from Wells Fargo Home Mortgage.
- ♦ 20% phone or online discount at 1-800-flowers.com and The Popcorn Factory from Wells Fargo Home Mortgage.
- ♦ PEPP Network Solutions - Certified Financial Experts become your personal equity management team. Much more than simple debt and credit reporting. Business Review, Real Estate Property Tax Reduction analysis, Retirement/Investment Portfolio analysis, and much more. Not just a report; monitoring and solutions from a network of financial professionals. Monthly membership for NYSBG subscribers is only \$9.95 per month -a tremendous savings!
- ♦ First National Merchant Solutions. A top ten national processor, offers NYSBG members special rates on a payment processing program that can help businesses retain more profit. Visa®/MasterCard® discount rates and no monthly minimum transaction requirements. Use your existing equipment or take advantage of low rental and/or purchase options.
- ♦ Effective debt collection services with National Credit Systems, Inc. Members pay a one time flat fee per claim form (minimum 30 @ \$25 per for Level 1 services). Three levels of services and reporting to Experian, TransUnion, and Equifax upon failure to pay.
- ♦ Discounted Office Supplies through Pennywise®. Up to 50% savings.

## NYSBG Wellness Package

You are entitled to one NYSBG Wellness Package with your annual dues.

You may add this package for additional employees or partners at the cost of \$45 per person per year.

Enrollment upon joining NYSBG or on the company's anniversary date is recommended.

**The Qualident® Dental Discount Program:** Obtain services from a panel of over 3,000 dentists statewide. No claim forms, no copays, no waiting periods, and no restrictions on cosmetic services. Discounted fees are listed in the schedule of services so you know what you're going to pay and save ahead of time.

**APS Prescription Program:** Save up to 60% on Generic and up to 25% on Brand name drugs. Choose from over 55,000 participating pharmacies nationwide. Pay the discounted amount at the time the prescription is filled, and realize your savings immediately. No claim forms or co-pays.

**\$25,000 Accidental Death & Dismemberment Coverage:** AD & D coverage is offered through The United States Life Insurance Company in the City of New York (now AIG), covers the Wellness Package recipient (under the age of 65) and provides benefits only in the event of an accidental loss of life or limb.

**The AMACORE Vision Program:** 30,000 Eye Care Professionals in over 13,000 locations nationwide who discount all of their services including LASIK. Substantial discounts available on contact lenses, frames and designer sunglasses and one FREE eye exam per membership for prescription glasses.

**Beltone Hearing Aid Program:** The Beltone Hearing Care Network consists of audiologists and state licensed hearing care practitioners. Receive up to a 15% discount on over 80 models of hearing aids and a free hearing test at U.S. Beltone Hearing Centers.

**The Health Connection:** Alternative medicine and therapies. This member program provides average discounts of 20-50% off Holistic Health Physician Network Services, treatments, select vitamins, and even select restaurants and retail stores. Be sure to check out their Spa Journey program for discounts at select spas!

## Business Owner/Individual Enrollment Section

How did you learn about the New York State Business Group? (Check all that apply)

Agent  Employer  Member Referral  Mail  Newspaper  Radio  T.V.  Internet

### PRIMARY ENROLLEE

Primary Member Date of Birth \_\_\_\_\_ SS # \_\_\_\_\_ # of dependents \_\_\_\_\_

### COMPANY

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Zip+4 \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Federal Tax I.D. # \_\_\_\_\_ Primary Industry \_\_\_\_\_

### DEPENDENT INFORMATION

Dep. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

Dep. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

Dep. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

Dep. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

### BENEFICIARY DESIGNATION (for US Life \$25,000 AD & D Policy Covering Persons Under age 65)

Name \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

Beneficiary Contact Information \_\_\_\_\_

# Optional Employee/Partner Enrollment in NYSBG Wellness Package

**EMPLOYEE 1** \_\_\_\_\_

\$45/year

Employee Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_ # of dependents \_\_\_\_\_

Dep. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

Dep. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

Dep. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

Dep. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

**BENEFICIARY DESIGNATION** (for US Life \$25,000 AD & D Policy Covering Persons Under age 65)

Name \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

Beneficiary Contact Information \_\_\_\_\_

**EMPLOYEE 2** \_\_\_\_\_

\$45/year

Employee Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_ # of dependents \_\_\_\_\_

Dep. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

Dep. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

Dep. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

Dep. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

**BENEFICIARY DESIGNATION** (for US Life \$25,000 AD & D Policy Covering Persons Under age 65)

Name \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

Beneficiary Contact Information \_\_\_\_\_

**EMPLOYEE 3** \_\_\_\_\_

\$45/year

Employee Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_ # of dependents \_\_\_\_\_

Dep. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

Dep. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

Dep. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

Dep. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

**BENEFICIARY DESIGNATION** (for US Life \$25,000 AD & D Policy Covering Persons Under age 65)

Name \_\_\_\_\_ Relation \_\_\_\_\_ SS# \_\_\_\_\_

Beneficiary Contact Information \_\_\_\_\_

## Thank you!

Please submit this form with your annual dues and payment for any additional NYSBG Wellness Packages to:

**NYSBG Corporate Headquarters**  
180 East Main Street, Suite 205, Patchogue, NY 11772

**NYSBG Annual Dues**..... \$60

**Additional Wellness Packages**  
\$45 each enrollee per year ..... \_\_\_\_\_

**TOTAL AMOUNT DUE**..... \_\_\_\_\_

Please make checks payable to: **The New York State Business Group, Inc.**

