



There. When You Need Us.™

GROUP MEMBERSHIP ENROLLMENT

Northwest Gold Prospectors Association

MEMBER ENROLLMENT INFORMATION

Name: _____ Date of Birth: _____

Spouse/Domestic Partner: _____ Date of Birth: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email Address: _____

Additional Eligible Household Members:

Includes any dependents claimed on your tax return and elderly or disabled family members living in the same household

	Date of Birth	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

____ I am an existing member. ID# (if known) _____

Member's Signature: _____

GROUP DISCOUNT MEMBERSHIP:

- ◆ Annual fee of \$50 per year per household.
- ◆ Discount rate is valid with enrollment through an approved group only.
- ◆ Payment directly to Life Flight Network is not available.
- ◆ Complete Statement of Understanding is found on the reverse side of this form.

LIFE FLIGHT NETWORK FOUNDATION
P.O. Box 3841 • Portland, Oregon 97208-3841
Phone: (503) 678-4370

This form is valid through 07/31/2020. Contact your employer or group representative for an updated enrollment form if this form is expired. New member benefits take effect 72 hours after receipt of completed enrollment form and payment. Life Flight Network transports patients based on medical need, not membership status. Medicaid beneficiaries should not apply for membership. Life Flight Network operates under its own FAA Part 135 Air Carrier Certificate.