

LIFELOCK GROUP APPLICATION

Company Information

Legal Name of Company _____

DBA Name _____

Street Address _____

City _____ State _____ Zip _____

Primary Contact _____

Phone Number _____

E-mail _____

Number of Eligible Employees _____

Enrollment Information

LifeLock Effective Date _____

LifeLock Enrollment Dates _____

LifeLock Offered
 During Traditional Open Enrollment
 Off-Cycle: Please provide traditional renewal date: _____

Enrollment Method
 Secure Enrollment Site
 Benefit Platform or TPA - Please specify: _____

Enrollment Mode
 Unlimited, allow enrollments anytime during the year
 Only during open enrollment or qualifying event

Payroll Cycle(s) -
 Select all that apply
 Weekly (52 pay periods)
 Biweekly (26 pay periods)
 Semimonthly (24 pay periods)
 Monthly (12 pay periods)
 Other: _____

Employer
 Contribution
 None
 Employer pays for employee only for:
 Other: _____

Marketing Information

Requested Materials -
 Select all that apply
 Employee Email Announcement
 Digital Employee Brochure
 Employee PowerPoint Presentation
 Internal Banner/Web Content
 Other _____

Do you want your company logo
 included on marketing materials?
 Yes. Please submit a logo with this application.
 No.

Billing Information

Billing Address	_____	
City	State	Zip
Billing Contact	_____	
Phone Number	_____	
E-mail	_____	
Multiple Bills Requested	No Yes - Please provide details: _____	

Broker Information

Broker/Agency Name	_____	LifeLock Writing #
Broker/Agency Name	_____	LifeLock Writing #
General Agency Name	_____	LifeLock Writing #

Employer Agreement

REQUIRED INFORMATION FOR LIFELOCK ENROLLMENT

The following information is required for employees to enroll with LifeLock: Name, Date of Birth, Social Security Number, Address, E-mail and Phone Number. For dependents, the following information is required to enroll: Name, Date of Birth and Social Security Number. It is understood and agreed, that if complete information is not provided, the employee and/or dependents with missing information will not be enrolled, and will not receive LifeLock services until the missing information is provided.

LIFELOCK EMPLOYEE SERVICES AGREEMENT BETWEEN THE COMPANY AND EXCELSIOR COMPANIES, ADMINISTRATOR ("EXCELSIOR") FOR LIFELOCK BENEFIT SOLUTIONS

The Company acknowledges that this agreement is between the Company and Excelsior to provide enrollment and ongoing billing services to facilitate the delivery of services from LifeLock to the Company's employees/members. Once an employee/member is enrolled and accepted by LifeLock, the employee/member of the Company enters into an end user agreement with LifeLock for service provided directly to the employee/member. Neither the Company nor Excelsior are parties to the agreement between LifeLock and the employees of the Company. Any changes in pricing will be provided 30 days prior to implementation and will be effective on your next plan anniversary date following the 30 day notice of pricing change.

To make the LifeLock Services available, the Company must deliver to each employee/member as a part of its benefit enrollment program a correspondence contain the enrollment information for the Services, a description of the Services (as provided by Excelsior/LifeLock) and their availability, and the instructions for the enrollment process. Excelsior will assist the Company in preparing these items.

This agreement shall commence on the effective date provided on this application and shall continue for a period of not less than one year(s) (the "Initial Term"). Thereafter, this Agreement shall automatically renew for one year periods thereafter unless otherwise terminated by a party as provided for herein. After the Initial Term either party may terminate this Agreement, with or without cause, on ninety (90) days prior written notice to the other party.

Authorized Signature _____ Date _____
Title _____

Privacy Statement

Excelsior Companies, LLC is committed to safeguarding your Company and employee/members privacy. The information you provide on this application will be used by Excelsior Companies, LLC and LifeLock, Inc. for purposes of the management and administration of your LifeLock Benefit Solutions program. It will not be disclosed to any third parties or used for any other purpose without your permission, which would be sought prior to any such use or disclosure. Excelsior Companies undertakes measures to keep your information secure until the time when it is no longer required, when it will be destroyed by secure means. If you require further information please contact us at lifelock@excelsiorcompanies.com or 1-866-917-2555.