

In order to add your dependent(s) to the Health & Welfare Plan, you will need to provide the following information (if applicable):

- Marriage Certificate
- Birth Certificate(s) – for children only

Also, you will need to provide your dependent(s) Social Security number(s) on the Health & Welfare Enrollment Form.

PLUMBERS, PIPE FITTERS & MES LOCAL UNION NO. 392

HEALTH AND WELFARE FUND ENROLLMENT FORM

EMPLOYEE INFORMATION

NAME:
 LAST _____ FIRST _____ MIDDLE _____

ADDRESS:
 STREET _____ CITY _____ STATE _____ ZIP _____

SOCIAL SECURITY NUMBER: _____ DATE OF BIRTH: _____ SEX: _____

HOME NUMBER: _____ CELL NUMBER: _____

MARITAL INFORMATION

SPOUSE'S NAME:
 LAST _____ FIRST _____ MIDDLE _____

DATE OF MARRIAGE: _____

DEPENDENT(S) INFORMATION

DEPENDENTS	DEPENDENTS' FULL NAME	DATE OF BIRTH	SOCIAL SECURITY NUMBER	RELATIONSHIP
SPOUSE				
CHILDREN				