

Club Members SAVE BIG!!

Enjoy the cheapest discount tickets in California and save up to 55% at local restaurants, shops, attractions, travel, and more!

YOU CAN EASILY
SAVE \$175

EACH MONTH

OVER 75,000 DISCOUNTS!

- Member exclusive events
- Food & restaurants
- Shopping
- Travel
- Movie theaters
- Sporting events
- Attractions
- Theme parks
- Business services
- Special events
- Car rentals
- Theatricals
- Merchandise
- Water parks
- Ski lift tickets
- And much more!

Look Out for Your Club Membership Card

Once your application is processed, your Club Membership card will be mailed directly to you. Your Club Membership ID is your key to unlocking a world of new Club benefit and savings!

Employees Club of California

120 West 2nd Street • Los Angeles, CA 90012
(888) 777-1744 • www.EmployeesClub.com

The Employees Club of California is a membership program of LACEA Insurance Services, Inc. (CA DOI Lic. #0B98000). LACEA Insurance Services, Inc. is a licensed insurance agency offering insurance benefits to qualified Club members. LACEA Insurance Services, Inc. is not directly affiliated with Metropolitan Life Insurance Company.

L.A. CITY & DWP

EMPLOYEES CLUB OF CALIFORNIA

JOIN THE CLUB

MEMBERSHIP APPLICATION

- Group-rated Term Life and AD&D Insurance
- Discount tickets up to 55% off
- Partner discounts
- Special events

Cheap Tickets.
Unparalleled Service.
Affordable Insurance.

EMPLOYEES CLUB OF CALIFORNIA

www.EmployeesClub.com

✓ Membership Application

JOIN
TODAY

Membership in the Employees Club of California (The Club) is available to employees of the City of Los Angeles and the Dept. of Water and Power (DWP).

The Employees Club of California celebrates the work and lives of municipal government employees since 1928 in California by offering exclusive discounts and benefits for travel, entertainment, dining, shopping, supplemental insurance, scholarships, and other membership perks.

Plus, Club Members have access to enhanced benefits in discount movies, sporting events, theme parks, exclusive engagements, and official Los Angeles and State of California apparel and merchandise.



ENDLESS SAVINGS

Exclusively for Club Members

- Discount to Theme Parks
- Save Big on Movie Tickets
- Discounts on Attractions & Sporting Events
- Travel Deals on Hotels and Car Rentals
- Competitive Group Rate Insurances
- Club Member Claim Advocate Team
- Big saving on dining and shopping nationwide



EmployeesClub.com

Eligibility Requirements for Life Insurance

You are eligible to apply for this coverage if you are an active member of the Employees Club of California in good standing; a full time employee working 30 hours per week for the City of Los Angeles or the Department of Water and Power; also must be eligible (except for Elector Workers) for the City Retirement System or the Department of Water and Power Pension Plan. You must elect Life Hay-Day plan within 60 days of becoming a new Member.

Term Life Insurance

Effective Date for Term Life Insurance: You will be insured on the last day of the pay period for which your payroll deduction is taken, provided the required premium is paid. You must be actively at work on the date insurance is to take effect. If you are not, insurance will take effect on the day you return to work.

Date Insurance Ends for Term Life Insurance: As long as you continue to pay premiums, you continue to be a member, the group policy remains in effect, continue to be in an eligible class, and insurance does not end for your class, your coverage will not end.

Exclusions for Term Life Insurance: If you commit suicide within 2 years from the date Life Insurance takes effect, we will not pay such insurance and our liability will be limited as stated in the policy. Any premium paid by you will be returned to the beneficiary and any premium paid by the policyholder will be returned to the policyholder.

Accidental Death & Dismemberment (AD&D) Insurance

Effective Date for AD&D Insurance: You will be insured for Accidental Death and Dismemberment on the date stated in writing by MetLife, provided the required premium is paid. You must be actively at work on the date your insurance is to take effect. If you are not, insurance will take effect on the day you resume such work. Dependent spouse and children are eligible for the AD&D coverage but not the Group Term Life plan.

Date Insurance Ends for AD&D Insurance: As long as you remain a member in good standing, continue to pay premiums, the group policy remains in effect, and insurance does not end for your class, your coverage will not end. If you retire, coverage under this Accidental Death and Dismemberment plan will end, and at which time you are eligible for Retirement coverage. In addition, with respect to spouses, as long as marriage does not end by divorce, annulment, coverage will continue. With respect to domestic partners, as long as the partner remains the domestic partner of the member, coverage will continue.

Exclusions for AD&D Insurance: No benefits will be paid for any loss caused or contributed to by: Suicide or attempted suicide; intentionally self-inflicted injury; service in the armed forces of any country or international authority. However, service in reserve forces does not constitute service in the armed forces, unless in connection with such reserve service an individual is on active military duty as determined by the applicable military authority other than weekend or summer training. For purposes of this provision reserve forces are defined as reserve forces in any branch of the military of the United States or of any other country or international authority, including but not limited to the National Guard of the United States or the national guard of any other country; a physical or mental illness or infirmity, or the diagnosis or treatment of an infection, other than infection occurring in an external accidental wound; voluntary intoxication by any means of any drug, medication or sedative unless taken as prescribed by a physician or an "over the counter" drug, medication or sedative taken as directed; alcohol in combination with any drug, medication, or sedative; or poison, gas, or fumes; or committing or attempting to commit a felony; war, declared or undeclared; or act of war, insurrection, rebellion or riot. We will not pay benefits for any loss if the injured party is intoxicated at time of the incident and is the operator of a vehicle or other device involved in the incident.

These Plans are underwritten by Metropolitan Life Insurance Company, New York, NY. This brochure is a brief description of benefits only.

Like most group benefit programs, benefit programs offered by MetLife and its affiliates include certain exclusions, exceptions, reductions, limitations, waiting periods, and terms for key provisions in force. Please contact your plan administrator for more information and complete terms and details.

These plans are only available in CA.

Metropolitan Life Insurance Company, New York, NY
Policy Number 165584-1-G
L0721015217[exp0723][CA] © 2021 MSS

NEW MEMBER INFORMATION

REFERRED BY
Member Name & ID:

Club Counselor:

Date: / /

Name of Association
Employees Club of California NEW MEMBER RETURNING (Joined Previously) Social Security Number: - -

First Name: _____ Middle Initial: _____ Last Name: _____ Gender: Male Female

Home Address: _____ City: _____ State: _____ Zip: _____

Home Phone: () _____ Mobile Phone: () _____ Date of Birth (MM/ DD/ YYYY): / / Marital Status: Married Single

City Dept # _____ City Employee # (5 - 6 Digits) _____ DWP Employee # _____

Department You Work For: _____ Job Title: _____ Date of Hire (MM/ DD/ YYYY): / / Work Phone: () _____

Email Address * _____

Please select one:

City Active DWP Active



Employees Club of California
311 S. Spring St. STE 1300
Los Angeles, CA 90013

* The e-mail address you provide will help us communicate with you regarding updates and benefits that may become available to you. Your e-mail address will be used solely by the Employees Club of California and will not be distributed to others.

CLUB MEMBERSHIP BENEFIT ADD-ON OPTION ▶▶ No Health Exam. No Health Questions!

Guaranteed Issue Term Life and AD&D Insurance

Mark your selection(s) below:

\$10,000 Term Life Insurance
Available for new members enrolled within the first 60 days.

Applicant Age	Bi-weekly Rate	Applicant Age	Bi-weekly Rate
Less than 30	\$1.10	50-54	\$5.10
30-34	1.20	55-59	8.60
35-39	1.50	60-64	12.30
40-44	2.10	65-69	25.00
45-49	3.10	70+	35.00

Rates will not be changed unless they are changed for all insureds in your classification, or when you reach the next age category.

\$25,000 Accidental Death & Dismemberment Insurance
only \$1.25 per month.
Additional amounts are available for you and your family. Please contact the Club for more information.

No Thanks! I am not interested in participating in the above group-rated insurance plans offered to me at this time.

Enrollment Instruction:

Please select the applicable Club Membership Benefit Add-On Option listed on the left and complete the required information below.

Name of Beneficiary:

Relationship:

Signature:

Date:

Benefit Add-On Option Eligibility
You can enroll for this plan if you are:
A FIRST TIME Club member and Active member of the Employees Club of California, actively working full-time (at least 30 hours per week), and participating in the City Retirement System or DWP Pension Plan.

I acknowledge that coverage will not take effect unless I am eligible for active payroll deduction and active payroll deduction is established. Please initial

Insurance provided by Metropolitan Life Insurance Company through the Club

FOR LOS ANGELES CITY AND DWP EMPLOYEES

PAYROLL DEDUCTION AUTHORIZATION

In addition to payroll/ pension deductions for group benefits, if any, you will receive all Club benefits for a payroll/ pension deduction of only \$6.00 per month (active employees) or \$4.00 per month (retired). You authorize these monthly deductions by signing the Payroll Deduction Authorization form.

Last Name: _____ First Name: _____ Middle Initial: _____ Social Security Number: - -

City Dept # _____ City Employee # (5 - 6 Digits) _____ DWP Employee # _____

To: **Controller City of Los Angeles, or Fire and Police Pension, or City Employees Retirement System, or Paymaster Department of Water and Power**



Employees Club of California
311 S. Spring St. STE 1300
Los Angeles, CA 90013
(800) 464-0452
info@employeesclub.com
EmployeesClub.com

Please select one:

City Active
 City Retired
 DWP Active
 DWP Retired
 Fire/ Police Pension (Officers Only)

I hereby authorize the deduction from my and pension of amounts sufficient to cover premiums/ membership fees on any of my group benefits provided by the Employees Club of California. In the event any premiums should change due to age, increase in salary or benefits, or a general rate increase for the entire Association, I authorize you to make such change upon notification from the Employees Club of California and such deduction to remain in force until canceled by me in writing.

FOR OFFICE USE ONLY

Code _____ Deduction _____

SIGN HERE

X _____ / / _____
Los Angeles City / DWP Employee Date