



Monumental Life Insurance Company

Underwritten by Monumental Life Insurance Company
Cedar Rapids, IA 52499

Applying Is Easy. Here's How:

1. Complete and Sign This Form.
2. Make Premium Check Payable to:
SPE Insurance Program
3. Mail Completed Form and Check to:
SPE Insurance Program
P.O. Box 189, Santa Barbara, CA 93102-0189

Have a Question or Need Additional Information? Please Call 1-800-337-3140 or E-mail: speinsurance@agia.com.

Cancer Insurance Plan Application

For Members of the Society of Petroleum Engineers

PLEASE PRINT IN INK OR TYPE ALL ANSWERS.

1 Member's Name and Address:

Member's Full Name: _____
LAST FIRST MIDDLE INITIAL

STREET ADDRESS _____

CITY _____

STATE (OR PROVINCE) _____ ZIP CODE _____

Phone Numbers: (_____) _____ (_____) _____
HOME WORK

| | Date of Birth (mo./day/yr.) | Sex (M/F) |
|--|-----------------------------|-----------|
| Member _____ | _____/_____/_____ | _____ |
| Spouse (if proposed for insurance) _____ | _____/_____/_____ | _____ |
| Child(ren) (if proposed for insurance) _____ | _____/_____/_____ | _____ |
| _____ | _____/_____/_____ | _____ |

(If more than two children are proposed for insurance, please attach a separate sheet.)

2 Membership Affiliation:

Are you now a member of the SPE? Yes No

What is your membership number, if available? _____

3 Insurance Requested: (Refer to brochure for eligibility and coverage description.)

Check box for coverage desired PLAN 1 Member Member and Family

PLAN 2 Member Member and Family

I wish to pay premiums Annually Semiannually

Please note: A \$2.00 administrative fee is added for billing modes other than annual.

Enclosed is my premium payment of: \$ _____ 19447

4 Do you currently have comprehensive health insurance coverage (i.e., hospital or medical expense insurance, an HMO contract, or Major Medical expense insurance)? Yes No If you answer "no" to this question, you are not eligible for this supplemental coverage.

I hereby represent that to the best of my knowledge, no person to be insured under this policy has been diagnosed with Cancer or received treatment* for Cancer (excluding Skin Cancer), Leukemia, or Hodgkin's Disease within the last 6 months.

Your coverage will be effective on the date of application approval, provided your first premium is paid and you are not hospital confined on that date.

**Treatment means medical and surgical care by a licensed provider to detect or cure Cancer. This includes examination, diagnostic procedures, surgery (including pre- and postoperative care), prescribed medication and the application of remedies and therapy. It does not include any diagnostic procedures or examinations performed to monitor a previous removal or remedy of Cancer, provided there is no positive diagnosis of Cancer or of a recurrence of Cancer.*

California law prohibits an HIV test from being required or used by health insurance companies as a condition of obtaining health insurance coverage.

Are you or any dependents eligible for Medicare? Yes No

Signature of Member **X** _____ Date _____
(PLEASE SIGN AND DATE IN INK.)

Signature of Spouse/
Domestic Partner **X** _____ Date _____
(PLEASE SIGN AND DATE IN INK.)

**IMPORTANT NOTICE TO PERSONS ON MEDICARE
THIS INSURANCE DUPLICATES SOME MEDICARE BENEFITS**

This is not Medicare Supplement Insurance

Some health care services paid for by Medicare may also trigger the payment of benefits under this policy. It does not pay your Medicare deductibles or coinsurance and is not a substitute for Medicare supplement insurance.

Medicare generally pays for most or all of these expenses.

Medicare pays extensive benefits for medically necessary services regardless of the reason you need them. These include:

- hospitalization
- physician services
- hospice
- other approved items and services

BEFORE YOU BUY THIS INSURANCE

- ✓ Check the coverage in **all** health insurance policies you already have.
- ✓ For more information about Medicare and Medicare supplement insurance, review the *Guide to Health Insurance for People with Medicare*, available from the insurance company.
- ✓ For help in understanding your health insurance, contact your state insurance department or state senior insurance counseling program.