

Membership Application

Joining the Alliance of Gig Workers grants you exclusive access to a variety of benefits for an average savings of over \$150 monthly!

- Immediate access to doctors 24/7 with a \$0 consultation fee with Teladoc
- Save from 10% to 80% off prescriptions with Clever RX

Monthly

- Dental savings from 15% to 50% with Aetna Dental Access Network
- Additional savings on vision needs, travel expenses, fitness & nutrition counseling, and more!

Applicant Information

Applicant Name			
Address			
		71.6.1	
City	State	Zip Code	
Date of Birth (mm/dd/yyyy)	Phone Nur	Phone Number	
Email Address			
Select Your Association Membership			
Member Only Membership			
\$14.99			

Dependent Information

Dependent Name	
Date of Birth (mm/dd/yyyy)	Relationship
Dependent Name	
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Date of Birth (mm/dd/yyyy)	Relationship
Dependent Name	
Date of Birth (mm/dd/yyyy)	Relationship
Dependent Name	
Date of Birth (mm/dd/yyyy)	Relationship
Dependent Name	
Date of Birth (mm/dd/yyyy)	Relationship

Read and sign the agreements below

Alliance of Gig Workers, from now on known as "Association". Please read the below membership and billing agreement. Signing below will indicate that you agree to the terms of membership and billing.

Member is an individual who resides in the United States, 18 years of age or older and otherwise eligible to receive services. This definition also includes the Member's dependents: legal spouse and/or children under the age of 26 years residing with the Member. A civil union spouse is considered a legal spouse for policies issued in the state of Illinois.

I am requesting enrollment as a Member of the Association and understand that there are dues associated with the membership. I understand that my failure to remit membership dues will result in loss of eligibility to participate in any of the Association sponsored programs or discounts. I understand this is not an insurance program or product.

Applications for membership received between the 1st and 28th of the month where the payment was successfully processed will be considered in good standing as of the 1st of the month. Applications for membership received between the 28th and the end of the month where the payment was successfully processed will be considered in good standing on the 1st of the following month.

Member understands that the Association will make every reasonable effort to ensure the information provided on its website is accurate at the time of initial posting; however, Member understands that it is the MEMBER'S RESPONSIBILITY to confirm the information listed with the product or service provider is still accurate and valid as of the date of purchase from the service provider. Member will contact Association in the event any benefit, discount or offer listed on the Association website purported by Member to be inaccurate in any way. Member understands that the Association does not set the discounts or services offered by the individual service provider; therefore, the Association cannot guarantee that any specific savings will be realized. It is the responsibility of the Member to verify service provider charges and make an informed determination of potential savings based upon market comparison. Member further understands that the Association and its affiliates, directors, officers, employees and representatives are not responsible for the outcome of any services received from any service provider associated with the Association either directly or indirectly; and, Member agrees to hold the Association and its affiliates, directors, officers, employees, representatives and associates harmless for any undesirable outcome or damage or loss caused by or resulting from any service, product or action of a service provider.

You further affirm you are not enrolling for someone else, another entity - or on your own behalf, for the purpose of, in whole or in part, of making threats or demands for money by alleging violations of the Telephone Consumer Protection Act and/or Federal Trade Commission DO NOT CALL registry or regulations. You expressly indemnify all parties involved in enrolling in these product(s) from any alleged violations, or threats of litigation, as it relates to the Telephone Consumer Protection Act or Federal Trace Commission DO NOT CALL registry related violations.

I agree to the terms of membership eligibility.	
Signature:	Date:

CONSENT TO CONTACT

I may be contacted using automated technology at the telephone number(s) I provided above regarding the plan and/or other product and service offers. Consent to receiving such calls and texts is not required as a condition to enrolling in the program and I may revoke my consent at any time as set forth in the Privacy Policy. Email or mail consent to communication is not revocable as a member of the Association as there may be legal requirements that may cause the association to reach out to Members and former Members. I agree to the consent of receiving communications from the Association and its business partners.

Initial Here	