



RHODE ISLAND CARPENTERS BENEFIT FUNDS

CHECKLIST OF ITEMS TO SUBMIT WITH YOUR HEALTH ENROLLMENT FORM:

Please utilize the checklist below to ensure that you have all necessary documents to complete your enrollment form for health coverage. This will expedite the enrollment process. Missing documents and incomplete form will delay the processing of your enrollment.

- ☐ **New Member Enrollment Form**
- ☐ **Other Insurance Inquiry**
- ☐ **Copy of your birth certificate**
- ☐ **Copy of your spouse's birth certificate** *(if applicable)*
- ☐ **Copy of your marriage license** *(if applicable)*
- ☐ **Copy of your photo ID**
- ☐ **Copy of your spouse's photo ID** *(if applicable)*
- ☐ **Copy of your Social Security card**
- ☐ **Copy of your spouse's Social Security card** *(if applicable)*
- ☐ **Copy of your dependent's birth certificate** *(if applicable and for each dependent)*
- ☐ **Copy of your dependent's Social Security card** *(if applicable and for each dependent)*
- ☐ **Copy of any previous divorce decrees, Qualified Domestic Relations Orders, Separation Agreements, etc.**

Please review the enrollment form you are submitting to make sure that you have completed all blanks, signed where necessary and answered the questions accurately and completely.