

**INTERNATIONAL EMERGENCY ASSISTANCE (IEA)
"Professional Transport & Return Facilitators"
OREGON RESIDENT MEMBERSHIP APPLICATION**

Name _____ Date of Birth _____

*Current Residence Address _____

City _____ State _____ Zip _____ Phone _____

Email Address _____

Nearest Relative Name _____ Relationship _____

City _____ State _____ Phone _____

**MEMBERSHIP BENEFITS
"PEACE OF MIND WHILE AWAY FROM HOME"**

- ✓ **Database entry & membership card to carry with you at all times**
- ✓ **Access to IEA's response center and professional staff 24 hours a day**
- ✓ **Access to IEA's network of qualified service and transport providers**
- ✓ **Guaranteed payment to qualified service and transport providers**
- ✓ **Assistance in obtaining discounted airfares for returning family members**
- ✓ **Benefits are transferable to any residence in the United States or Canada**
- ✓ **Toll free IEA telephone within USA 877.288.8114 – Outside of the USA telephone 503.595.0448**

In the event of member's demise while traveling more than 75 miles from their residence, IEA will facilitate the transport and return of the member's mortal remains or ashes via appropriate means, facilitate all necessary documentation as required and maintain appropriate communications between the sending service provider, transport carrier, your receiving service provider and the member's family. If necessary, IEA will facilitate the procurement of consular services. IEA will wire required payment to the qualified service and transport provider(s) for all of the above described arrangements (up to a maximum of five thousand dollars) at no additional cost to Member. IEA will act as the member's personal representative as a transport and return facilitator. In order to receive transport benefits described herein, IEA (or IEA Seller Representative) must be contacted first and all transport related arrangements must then be facilitated by IEA through IEA's selected qualified service provider network. If IEA (or its seller representative) is not notified first, additional costs will be incurred and no claims for reimbursement will be accepted by IEA. Benefits hereunder will not apply in the event of death caused by suicide, acts of war, terrorism or occurrence of death outside the United States or Canada while traveling for the specific purpose of receiving medical care outside the United States or Canada. *Residence is defined as where a member resides for 90 days or more in the twelve months preceding the date of death. A member may have more than one residence. Qualification of residence(s) will be required before transport arrangements are facilitated by IEA. A nursing home, foster home or medical institution (or like kind) will be deemed the residence if the stay has exceeded 90 days. If enrollment in IEA occurs while traveling away from the residence(s), IEA membership and benefits become effective for subsequent travel upon the Member's return to their residence(s). DISCLOSURES: Benefits under this membership are available to legal citizens and residents of the United States and Canada only, unless individual state law precludes such. IEA acts on behalf of its member as a professional transport facilitator and assures compliance with OAR 830-030-0060-0070 and ORS 692.040(3)(4). IEA is not providing insurance and is exempt from such in compliance with ORS 731.036(8)(c). IEA is not providing funeral or cremation services or related merchandise of any kind as defined under ORS 692.020, 025 and ORS 97.010.

IEA MEMBERSHIP OPTIONS

'STANDARD' Lifetime Membership \$_____ (contact your IEA representative)

Includes benefits mentioned above, membership identification card, database entry, administration, access to IEA's 24 hour response center, facilitation of necessary transport arrangements through IEA's network of qualified transport providers to return cremated remains in a minimum appropriate transport container to a location nearest member's primary residence...

'PLUS' Lifetime Membership \$_____ (contact your IEA representative)

Includes benefits mentioned above, membership identification card, database entry, administration, access to IEA's 24 hour response center, facilitation of necessary transport arrangements through IEA's network of qualified transport providers to return mortal remains in a minimum appropriate transport container to a location nearest member's primary residence...

In the event of my demise while traveling more than 75 miles from my *residences(s), I authorize IEA or its agent(s) to facilitate and pay for all necessary transport and return arrangements in accordance with this membership agreement. I also understand that my IEA Membership is transferable to a new residence, however it is my responsibility to notify IEA of such change of residence in order for IEA to revise its database information as necessary.

Member (Applicant) Signature _____ **Date** _____

IEA Seller Representative ("Seller") to complete the information below:

Representative ("Seller") Individual Name _____

Representative ("Seller") Individual Signature _____ **Date** _____

("Seller") Company Name _____

("Seller") Company Address _____

City _____ State _____ Phone _____

TERMS OF PAYMENT:

____ Check or Cash In Full (circle one) Check # _____ Acct. Name _____

____ Credit Card Bank Name _____

***Payments made hereunder shall be in the form of check, money order or credit card**

CREDIT CARD INFORMATION:

Name on Credit Card _____ Credit Card Co. _____

Billing Address on Credit Card _____

Credit Card No. _____ Security No. (on back) _____

Credit Card Expiration Date _____ Billing Ph# _____

YOU THE BUYER MAY CANCEL THIS TRANSACTION WITH FULL REFUND AT ANY TIME PRIOR TO MIDNIGHT OF THE 30th DAY AFTER THE DATE OF THIS TRANSACTION. NO EMPLOYEE OR REPRESENTATIVE IS AUTHORIZED TO MAKE VERBAL AGREEMENTS OTHER THAN THOSE CONTAINED HEREIN. YOUR MEMBERSHIP IS NOT INSURANCE OR A PREPAID FUNERAL PLAN.

Copy To: INTERNATIONAL EMERGENCY ASSISTANCE, SELLER and MEMBER

**IEA - 6663 SW Beaverton Hillsdale Hwy. #54 - Portland, OR 97225 - Toll Free PH 877.288.8114 - PH 503.595.0448 - Fax 503.236-3144
Email - info@ieaco.com**