



Guardian Anytime Website
Pre-Registration Form &
Consent to Delivery of Electronic Materials

Use this form to pre-register for the Guardian Anytime Benefits Administration Website. Pre-registration enables you to receive your first bill online and begin using the site to administer your benefits as soon as your plan information has been loaded into Guardian systems. Please include this form with the initial case submission package (enrollments, applications, etc.) If you prefer, you may register for the site yourself, once you receive your first bill.

PLAN INFORMATION

Company Name _____

Group Number _____ Effective Date _____

Division Number(s): All: Only Division Numbers: _____

Do you authorize your broker to complete changes on Guardian Anytime? yes no

If yes, please indicate broker name: _____

* Please be aware that Guardian needs to be notified when this authorization is revoked.

PLAN ADMINISTRATOR(S) AUTHORIZED TO ADD, VIEW OR CHANGE ALL INFORMATION VIA GUARDIAN ANYTIME

Each individual pre-registered by Guardian will receive an e-mail with instructions on how to complete the registration process and access the Guardian Anytime website once your plan information is available. As part of Guardian’s efforts to Go Green, billing statements will be available for viewing and, if you choose, payment through Guardian Anytime. If you require paper billing statements mailed to you, please log onto Guardian Anytime and select “Change Billing Options” under the “Billing” tab. Administrative fees for paper bills may apply. If you have questions about the pre-registration process, please call the Customer Response Unit at 800-627-4200.

Administrator(s) Names	Telephone Number(s)	Email Address(es) ~Please print clearly~

GENERAL CONSENT TO ELECTRONIC DELIVERY OF PLAN MATERIALS

Guardian will make all plan materials and related documents available to you online at:

www.GuardianAnytime.com

By signing below, you agree that you are an officer of Your Company or thereby designated and authorized approver of access (“Approver”) on behalf of your Company and are responsible for ensuring only authorized persons are able to access the sensitive information maintained by Guardian related to your plan that is protected by applicable state and federal privacy laws. You agree that you will manage access by your employees and/or agents to enable them to access and receive information through Guardian administrative systems (“The Administrative Systems”) to perform enrollment, disenrollment and billing related functions. As such you agree to: (1) notify Guardian of changes to authorized users; (2) periodically audit your user accounts who have access to the Administrative Systems to validate that all access is still required; (3) indemnify Guardian for any liability to Guardian caused by your plan’s access to the Administrative Systems or your failure to provide updated users information to Guardian, including but not limited to the failure to terminate a user’s access to Administrative Systems once access is no longer required.

Further, you consent to receiving electronic versions of Guardian plan materials and related documents, in lieu of paper copies, to the extent permitted by applicable law. You understand that you may change this election by providing Guardian thirty (30) days prior written notice.

Name and Title of Authorized Representative

Signature, Authorized Representative