




NEW EMPLOYER CHECKLIST

ENROLLING YOUR CHURCH FOR 2019

This checklist is for employers who wish to enroll their employees in the Alliance Health Plan. Click on each form to access it or visit www.alliancebenefits.org/forms.

FORMS TO COMPLETE

- [Employer Bank Authorization](#)
- [Employer Certification](#) (one per employee)
- [Employee Enrollment](#) (one per employee)

 Questions? Please call (800) 700-2651 or e-mail benefits@cmalliance.org.



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