



SOUTHWEST CARPENTERS TRUSTS ENROLLMENT FORM

533 S. FREMONT AVENUE, LOS ANGELES, CA 90071

EMAIL TO: ENROLLMENT@CARPENTERSRW.ORG

FAX TO: (213) 739 - 9437

Directions: Complete this form to enroll in the Plans administered by CSAC or use this form to update your record.
Complete each page of this form, print it, sign it and return it via email, fax or mail.

CHECK ONE	New Participant? <input type="checkbox"/>	Updating Your Record? <input type="checkbox"/>
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PARTICIPANT INFORMATION

Social Security Number		Date of Birth (MM/DD/YYYY)		Are you Retired?		Yes	No	
Last Name			First Name			MI		
Street Address			City		State	Zip Code		
Local Union #		Initiation Date			Sex (Check One)		M	F
Email Address					Phone #			
Check One		I consent to receive electronic delivery of Plan documents by email or text message.						
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>					
In the event the Administrative Office is unable to locate you to distribute benefits, please provide the name and contact information for a person who does not live with you that would help the Administrative Office locate you to distribute benefits.								
Name				Relation				
Email Address				Phone Number				

Electronic Delivery of Plan Correspondence

As a participant, you are entitled to important materials explaining how your various benefits work. You have the option to receive this information electronically by email. Electronic documents or a link to a document in PDF format may be emailed to the address you provided. The PDF version of the document is identical to the paper version you would otherwise receive in the mail.

You may also receive important alerts regarding your plan benefits via text messaging.

The delivery of documents to you by email may reduce the amount of mail you receive from the Administrative Office. However, certain documents and service-related correspondence may continue to be sent via U.S. Mail.

- Your consent to receive electronic delivery of Plan documents is valid unless and until you withdraw your consent in writing. You can opt out of electronic delivery at any time or change your email address and phone number by contacting the Administrative Office.
- You have the right to request hard copies of documents pursuant to ERISA section 104(b)(4). Send an email to info@carpentersrw.org or call (800) 293-1370 to request a hard copy of a document.
- If you have difficulty accessing any document, please contact the Administrative Office at info@carpentersrw.org or call (800) 293-1370. Many of the Trust Funds documents are also available on the CSAC website (www.carpentersrw.org). Please note that documents posted to the CSAC website may be taken down after one year or earlier if they are superseded by a new version.
- Standard message rates and data charges from the subscriber's carrier could apply when sending and/or receiving text messages.
- You may opt out of electronic delivery or change your contact information by submitting a new, signed form by:
 - Email to: enrollment@carpentersrw.org
 - Mail to:

Southwest Carpenters Trust
533 S. Fremont Avenue, 6th Floor
Los Angeles, CA 90071

Signature	Date
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Last Name	First Name	MI	Social Security Number
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SOUTHWEST CARPENTERS VACATION, SICK LEAVE AND PAID TIME OFF TRUST

The Southwest Carpenters Vacation, Sick Leave and Paid Time Off Trust will distribute Benefits as follows:

- Automatically on **December 1st** for eligible, enrolled Participants who have accrued benefits according to the applicable Labor Agreement for hours worked through August of the current year via direct deposit or physical check.
- Automatically, if elected, on **July 1st** for eligible, enrolled Participants who have accrued benefits according to the applicable Labor Agreement for hours worked through February of the current year via direct deposit **ONLY**.
- Effective July 1, 2022 On Demand Early Withdrawals are available upon request through MemberXG to eligible, enrolled Participants who have accrued benefits according to the applicable Labor Agreement via direct deposit **ONLY**. This option is available to Participants up to two (2) times per calendar year. See the SPD for details.

Participants may choose to receive an automatic distribution in July and December or **ONLY** in December. **Please note that July distributions are ONLY made via direct deposit.**

CHECK ONE

<input type="checkbox"/> Receive ONLY a December Distribution (Direct deposit preferred, paper check available)	OR	<input type="checkbox"/> Receive a July Distribution and December Distribution (only by direct deposit)
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Participants may choose to receive their distribution by physical check to the address on file in December, or by direct deposit to their bank account (available for December and Early Withdrawals). The participant must be a listed owner of the account used for direct deposit.

CHECK ONE

<input type="checkbox"/> Distribution by Direct Deposit	OR	<input type="checkbox"/> Distribution by Physical Check (December Distribution ONLY)
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For distribution via direct deposit, attach a voided check or deposit slip with the Participant's name printed by the financial institution.

To authorize an electronic distribution to your bank account you must provide a voided check, direct deposit slip or a direct deposit authorization form. Your Vacation distribution will be sent to the account you indicate until you revoke or replace this authorization in writing or until an electronic distribution is rejected by your banking institution.

By providing your banking information you agree that you will reimburse and indemnify the Southwest Carpenters Vacation Trust, if you are not the person entitled to benefits, and that you are responsible for verifying the banking information you provided. You hereby authorize the Southwest Carpenters Vacation, Sick Leave and Paid Time Off Trust to make credit or debit entries as adjustments for any error made to your bank account. The Southwest Carpenters Vacation, Sick Leave and Paid Time Off Trust is not responsible for lost or stolen funds once deposited to the bank account information you have provided.

Signature	Date