



FUNERAL

CREMATION

Participant: \_\_\_\_\_ Email: \_\_\_\_\_

Current Legal Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex: \_\_\_\_ Social Security #: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Home Phone #: (\_\_\_\_) \_\_\_\_\_

Marketer: \_\_\_\_\_ ID#: \_\_\_\_\_

Funeral Home/Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone#: (\_\_\_\_) \_\_\_\_\_

### Membership Benefits include

- ✓ Contacting a licensed funeral home or professional embalming service center near the place of death
- ✓ Transporting the deceased from the place of death to the funeral home or service center for preparation
- ✓ Preparation of the deceased for transport
- ✓ Securing all documentation for shipping including one death certificate
- ✓ Placing the deceased in appropriate shipping container
- ✓ Arranging for transportation to their local funeral home

In the event of death of a Participant who is 75 miles or more away from his or her legal residence at the time of death, the Travel Plan by Inman will render assistance, including locating a local, licensed funeral home, mortuary or direct disposition facility, arranging and paying for the transportation of the body from the site of death to the licensed funeral transport, purchasing the minimally necessary casket or air tray for transportation, arranging for the transportation to local funeral home and securing all documentation including one death certificate.

Return of remains services are provided by Inman Shipping Worldwide when Participants are traveling 75 miles or more from their legal residence\* or in another country which is not the country of residence. All services **MUST** be arranged by Inman Shipping Worldwide, **NO** claims for reimbursement will be accepted. Enrollment in the Travel Plan by Inman is not valid until payment has been received by the Travel Plan Administrative Center and an enrollment number has been issued to the purchaser.

\*"Legal residence," for purposes of the Travel Plan, shall mean the participant's fixed and full-time place of abode. The Travel Plan may require verification of a participant's legal residence through requests for documentation or information evidencing the residence of the participant at the time of, and prior to, the participant's death. Notwithstanding the foregoing, if a participant physically lives at an address for a period of 180 days or more within the twelve (12) month period prior to the participant's death, that address, as opposed to the current legal address identified above, will be considered the participant's legal address. A nursing home will be deemed a participant's legal residence if the participant stays at the nursing home for a period of 180 days or more.

If Participant enrolls in the Travel Plan while Participant is away from his or her legal residence, the plan of assistance will not become effective until the Participant has returned to his or her legal residence for subsequent travel.

#### NOTE: PLAN DOES NOT COVER MEDICAL TOURISM

**Return to:** **Travel Plan by Inman**  
9077 Stelhorn Crossing Parkway  
Fort Wayne, IN 46815

Participant will be mailed their membership identification card and change of address form from the Travel Plan by Inman.  
Questions: (888) 889-8508

\_\_\_\_ Check enclosed, payable to Travel Plan by Inman.

Participant's Signature

Date

Marketer's Signature

Date