

AFEUSA Self Enrollment





Part 1 – Invite

Desk

AFEUSA Desk Portal

Desk.sellafe.com

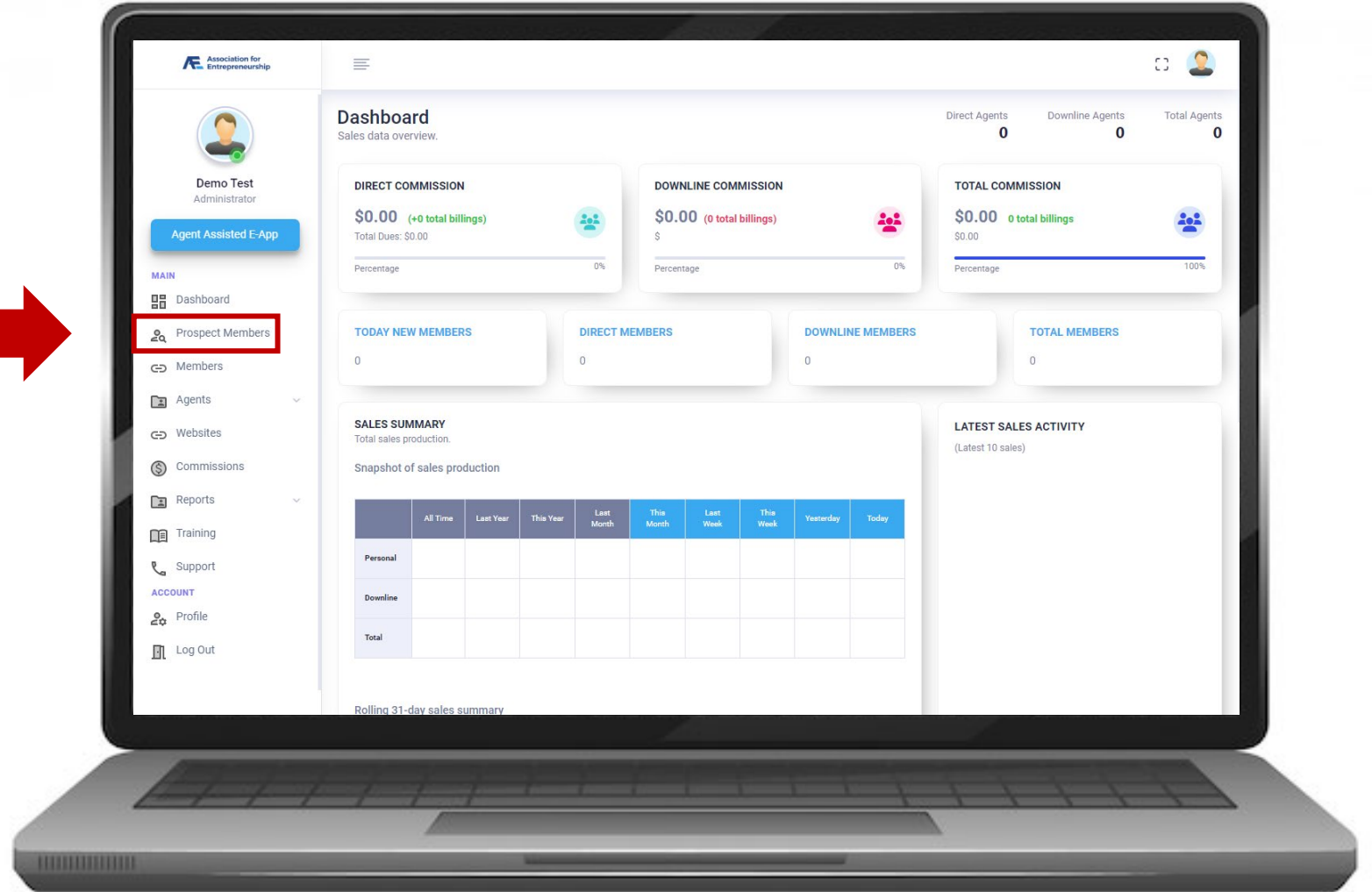
- Username is your Email Address
- Input your Password
- Complete the reCAPTCHA
- Sign In



AFEUSA Desk Portal

Email Invite:

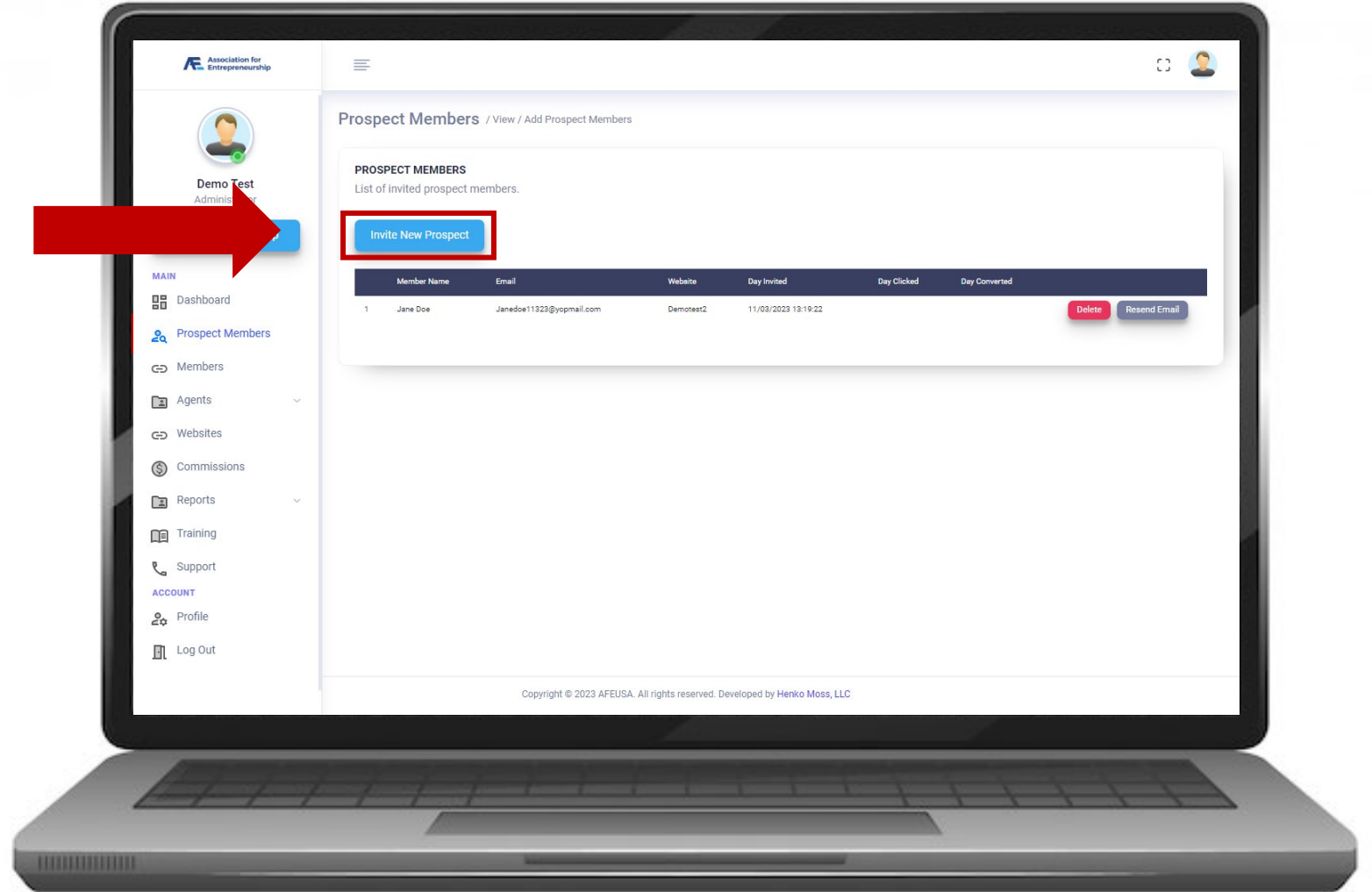
- Click on Prospect Members



AFEUSA Desk Portal

Email Invite:

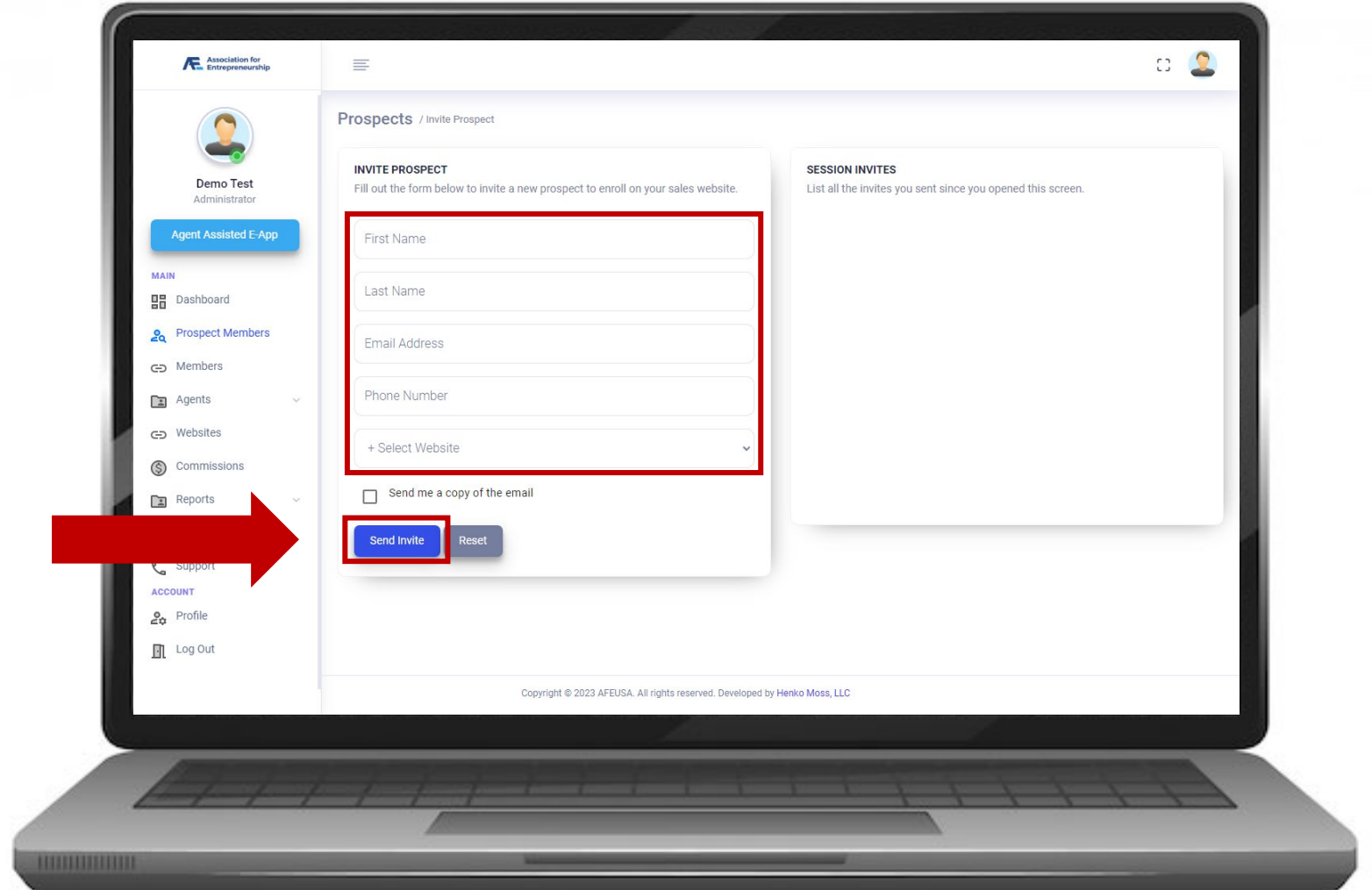
- Click on Invite New Prospect



AFEUSA Desk Portal

Email Invite:

- Complete the Form
- First Name, Last Name, Email Address, Phone Number
- Select Website – you can have more than 1 Sales Website
- Click on Send Invite



AFEUSA Desk Portal

Email Invite:

- Member Receives Email
- Your Name, Phone, Email
- Link To Your Sales Website

The screenshot shows an email invitation from the Association for Entrepreneurship (AFEUSA). The email is titled "Member Invitation to AFEUSA" and is addressed to "Dear Client Bob". It describes the benefits of AFEUSA membership, including education, community involvement, and peer collaboration. It also lists specific benefits such as 24/7 access to a board-certified Medical Doctor, Vision Savings Pass, and a Discount RX program. The email includes a "GET STARTED" button and contact information for the Agency Demoist.

Member Invitation to AFEUSA

Dear Client Bob,

AFEUSA promotes entrepreneurship (and the gig economy) through education, community involvement, and peer collaboration. Membership provides a variety of resources/benefits: business services/business coaching, health & wellbeing, legal, financial services and more.

Using the purchasing power of tens of thousands of members nationwide, AFEUSA also offers members insured products. Examples: Group Life Insurance, Supplemental Health (Accident Medical/AD&D), Critical Illness, Hospital Indemnity and Dental (see state availability for all products) - from established, highly rated national companies.

AFEUSA membership is for those who are now or have considered in the future, participating in any form of entrepreneurship; age 18+, residing in the USA, currently working, or if not, fully capable of working.

[GET STARTED](#)

Examples of benefits included in your membership

Telemedicine (available to members age 18+) 1.800.804.2477
24/7 access to a board-certified Medical Doctor for a broad variety of non-emergency health issues
No consult fees and unlimited consults

Vision Savings Pass (available to members age 18+)
Lower cost eye exams and retinal screenings
Lower costs for eyewear including lenses, frames, contact lenses

Discount RX program
Save up to 85% on your prescription drug needs

ID Theft Restoration provided by Allstate
Help restore your identity in the event of ID theft.

[GET STARTED](#)

Plus...

As a member you will also have access to our unique and exclusive insurance products that are backed by "A" rated carriers that are among the best companies that you can trust. Products and benefits may not be available in all states. These are highlights of Membership, services, benefits, and products. It does not include all features, exceptions, and limitations.

To learn more or to become a member of the Association please click the link below to get started

Agency Demoist
Phone: (323) 847-0209
Email: agencydemoist21222@gmail.com

[GET STARTED](#)

WWW.JOINAF.COM

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AFEUSA HEALTH INSURANCE.

AFEUSA created flexible flexible benefits and solutions that are affordable for individuals and small businesses. Access to the insurance plans is provided upon joining AFEUSA, a national association with over 100,000 members.

[UNSUBSCRIBE](#)

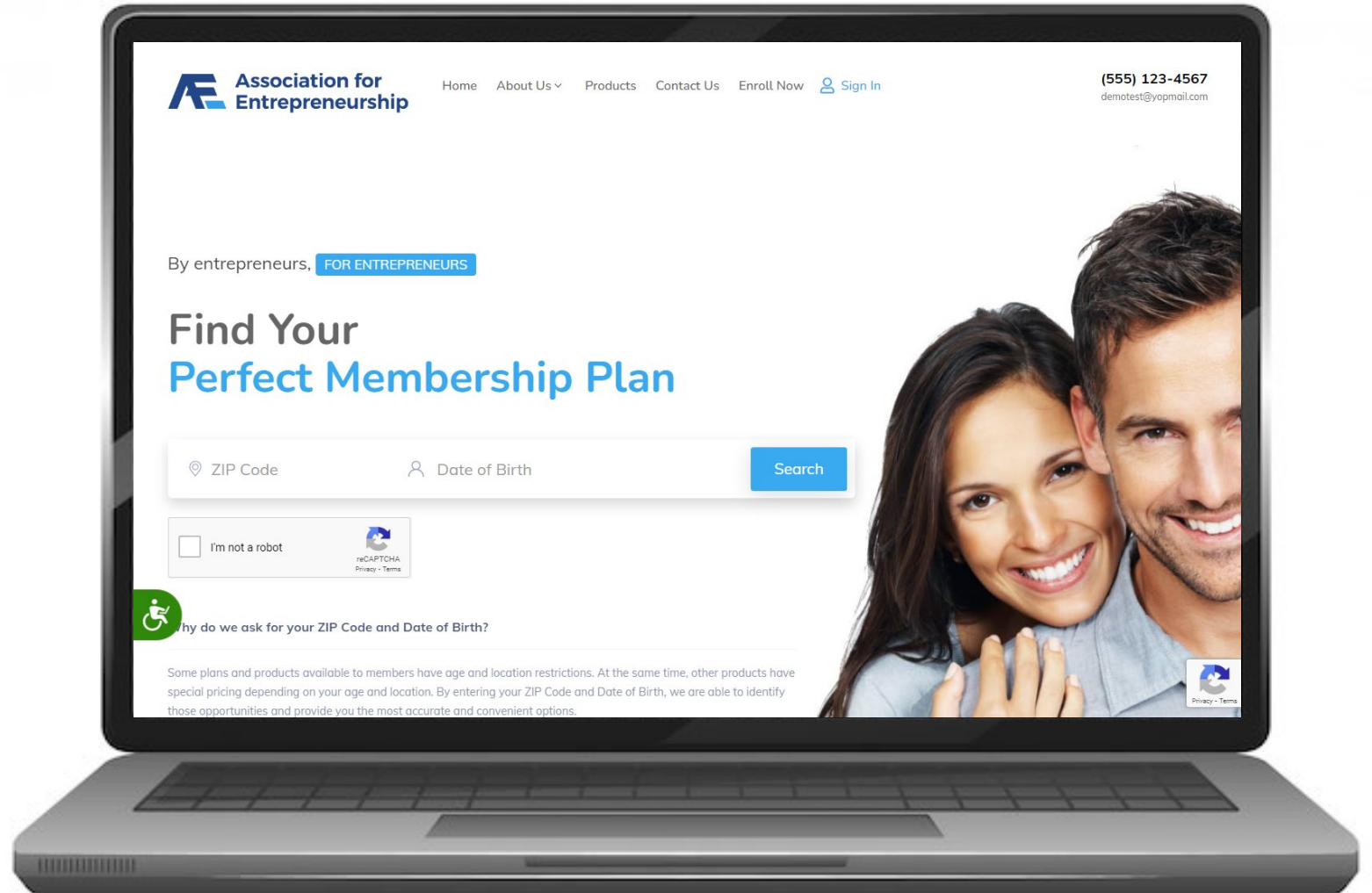
Sales Website

Branded To You:

- Your Logo
- Your Name
- Your Phone Number
- Your Email Address

IMPORTANT TIP

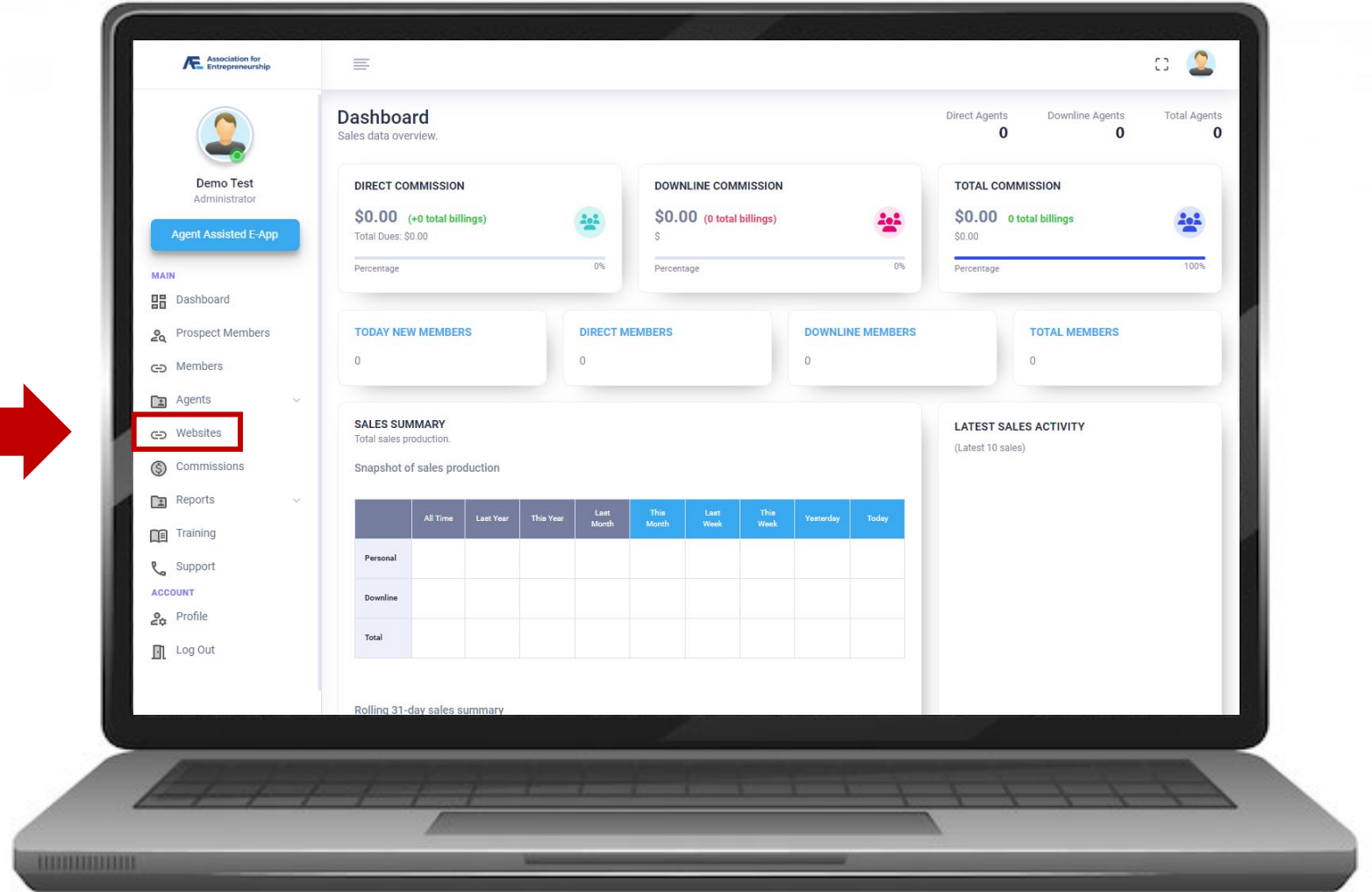
You can also send people directly to your website.



AFEUSA Desk Portal

Sales Website:

➤ Click on Websites



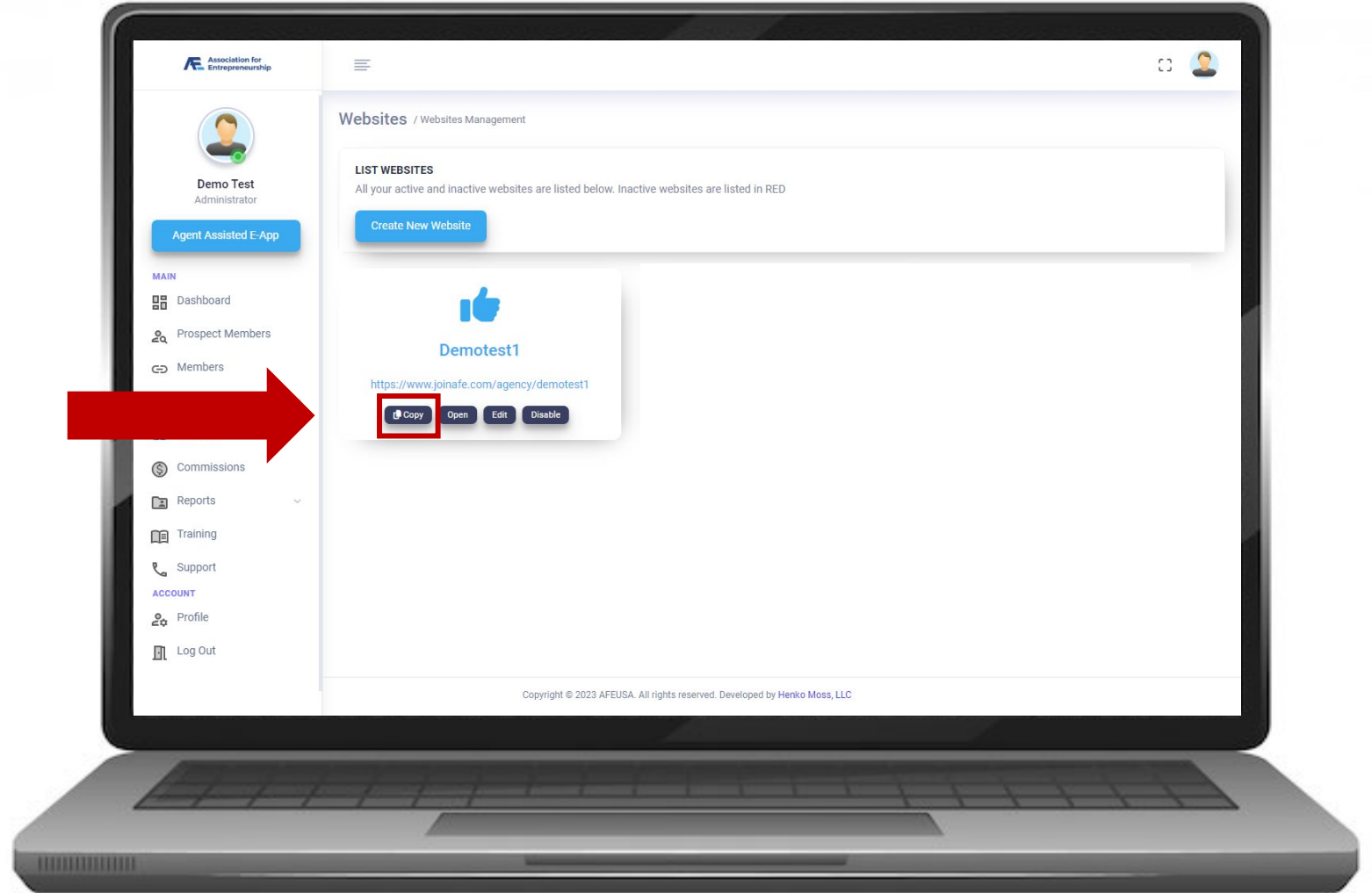
AFEUSA Desk Portal

Sales Websites:

- Click on Copy
- Paste it where you are Promoting
- Social Media, Email Signature, Email Campaign, Personal Email, Website etc.

IMPORTANT TIP

If you bookmark your Sales Website you will need to edit that bookmark by deleting /website at the end of the URL.





Part 2 - Quote

Enrollment

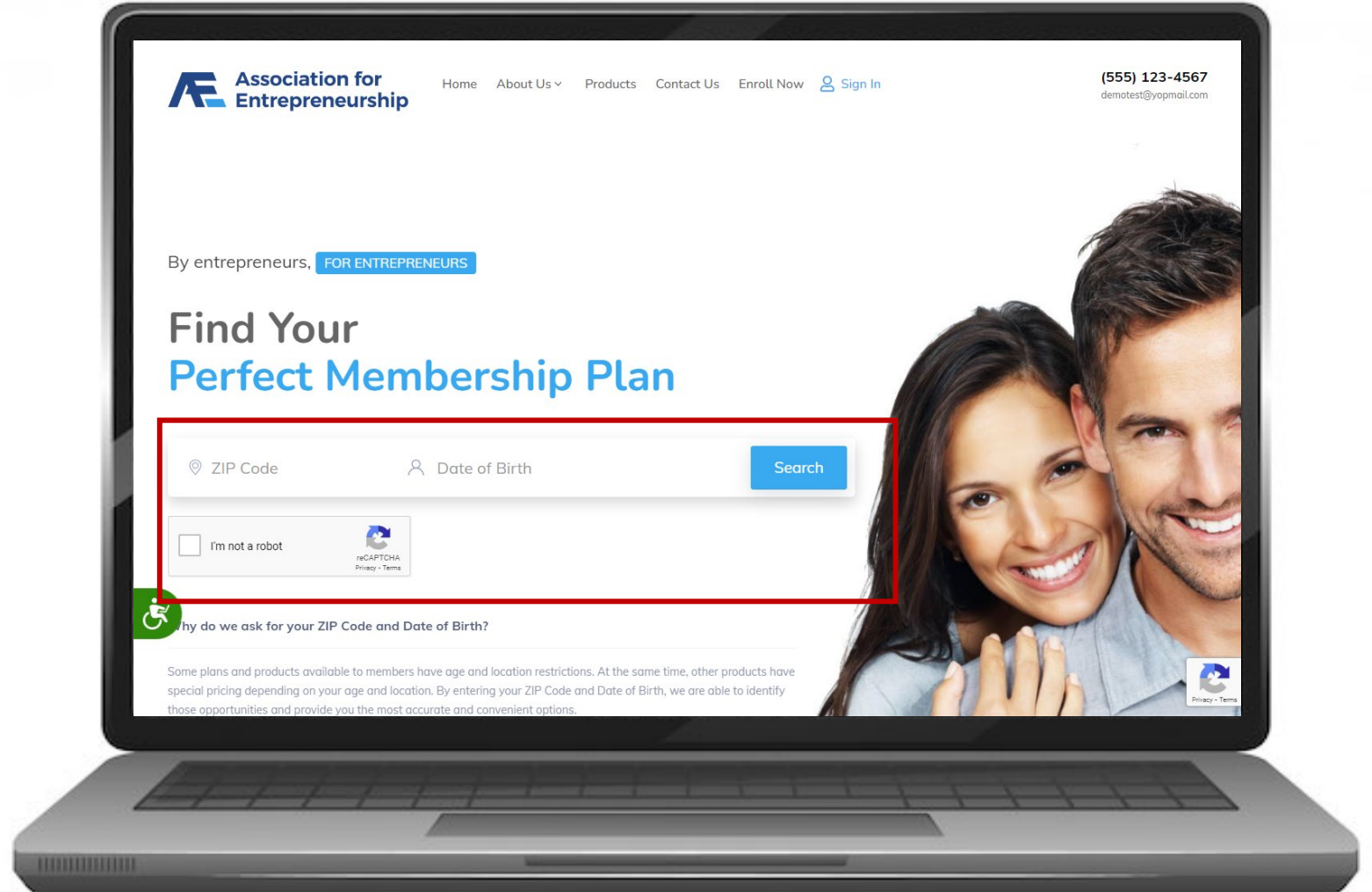
Agent Assist

Products are Filtered By State and Age:

- ZIP Code
- Date of Birth
- Complete the reCAPTCHA
- Search

IMPORTANT TIP

If you need to modify information on the LifeTime Benefit Term Quote you will need to restart from this step.



Select Membership

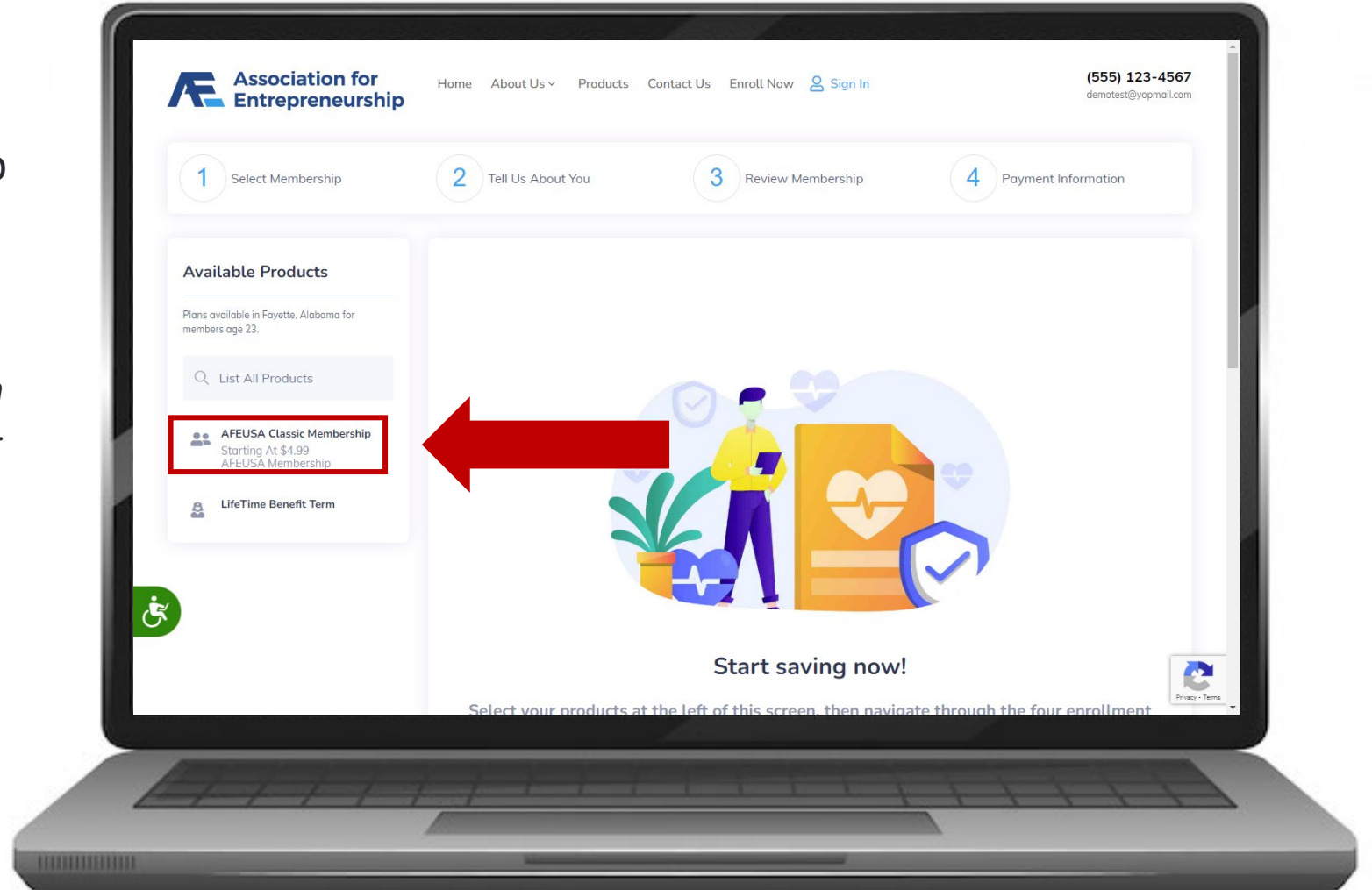
Step 1:

➤ Click on AFEUSA Classic Membership

IMPORTANT TIPS

A Membership is required to purchase insurance.

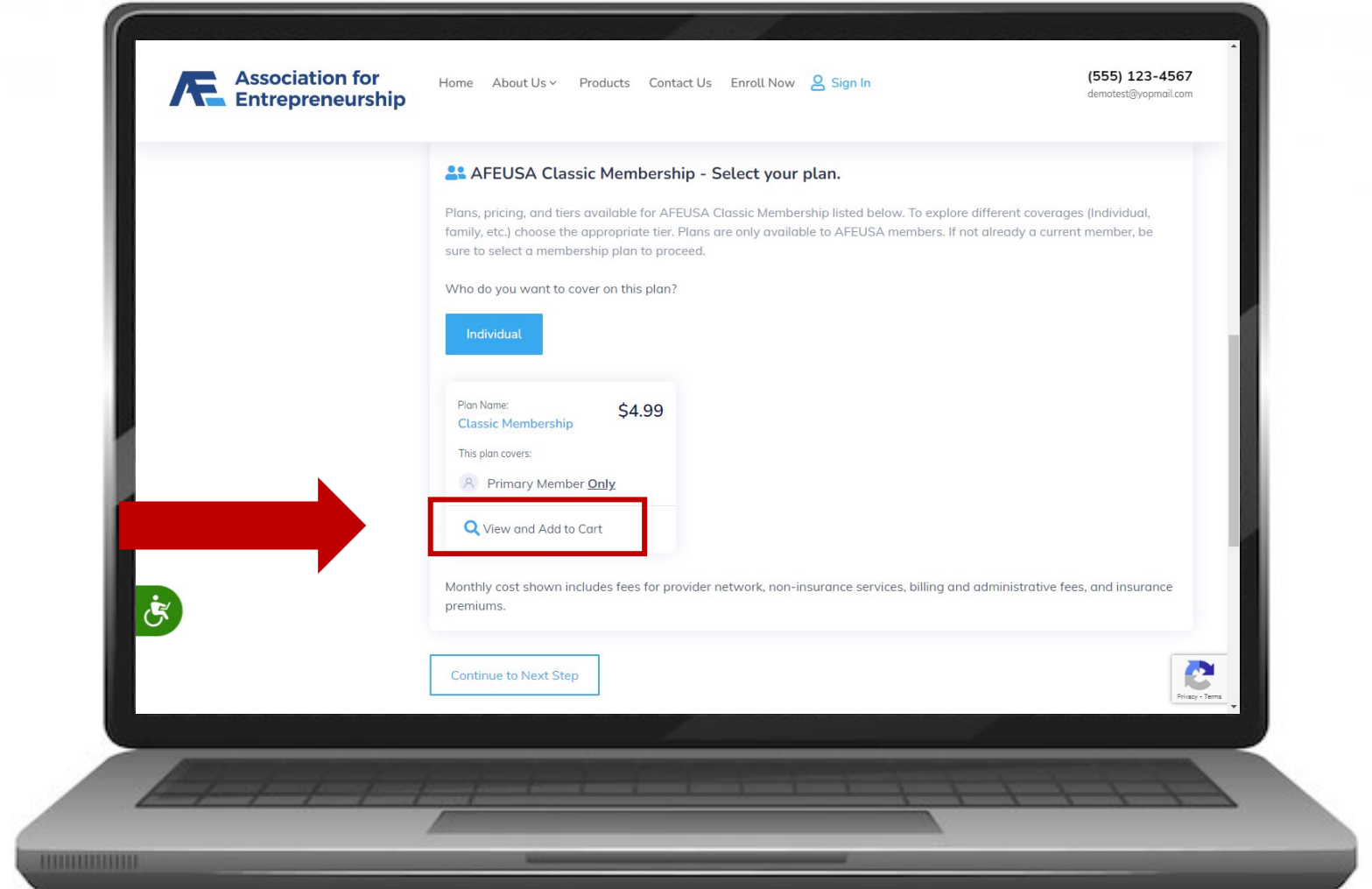
Navigate by clicking on the steps, do not press back in your web browser or you will need to restart the quote.



Select Membership

Step 1 Continued:

- Scroll Down
- Click on View and Add to Cart



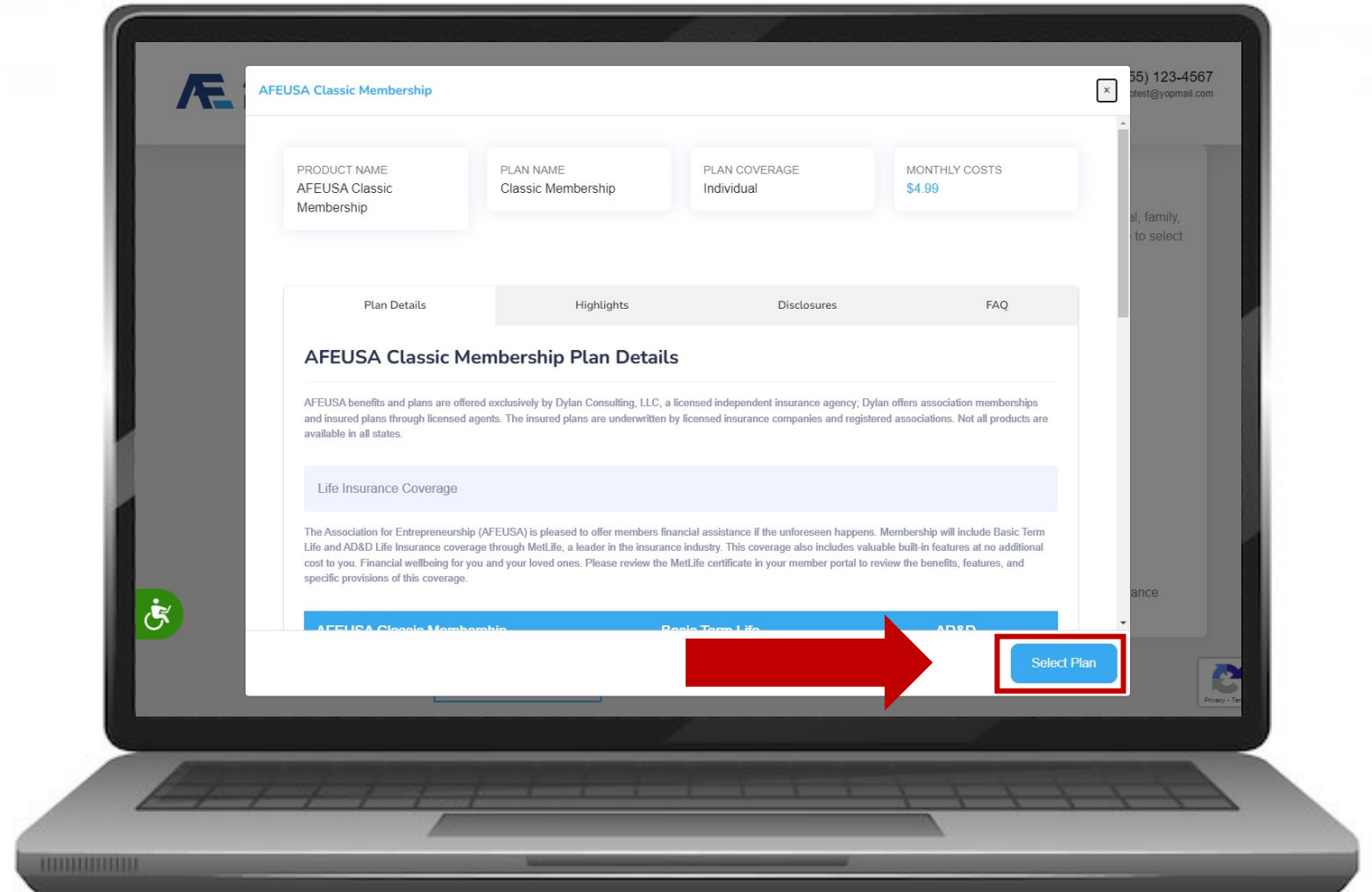
Select Membership

Step 1 Continued:

➤ Click on Select Plan

IMPORTANT TIP

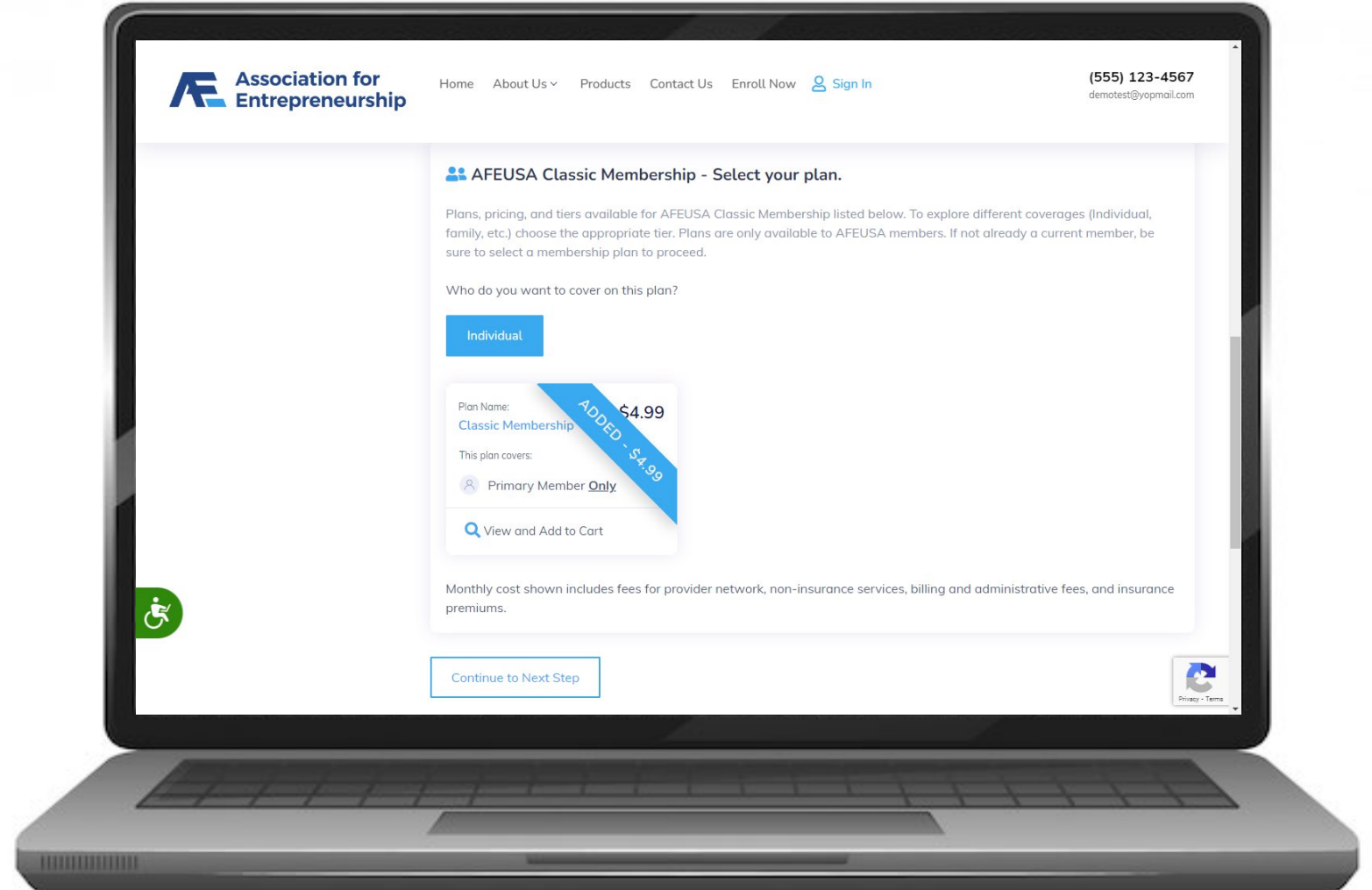
You can learn more about the product by clicking on the various tabs: Plan Details, Highlights, Disclosures, and FAQ.



Select Membership

Step 1 Continued:

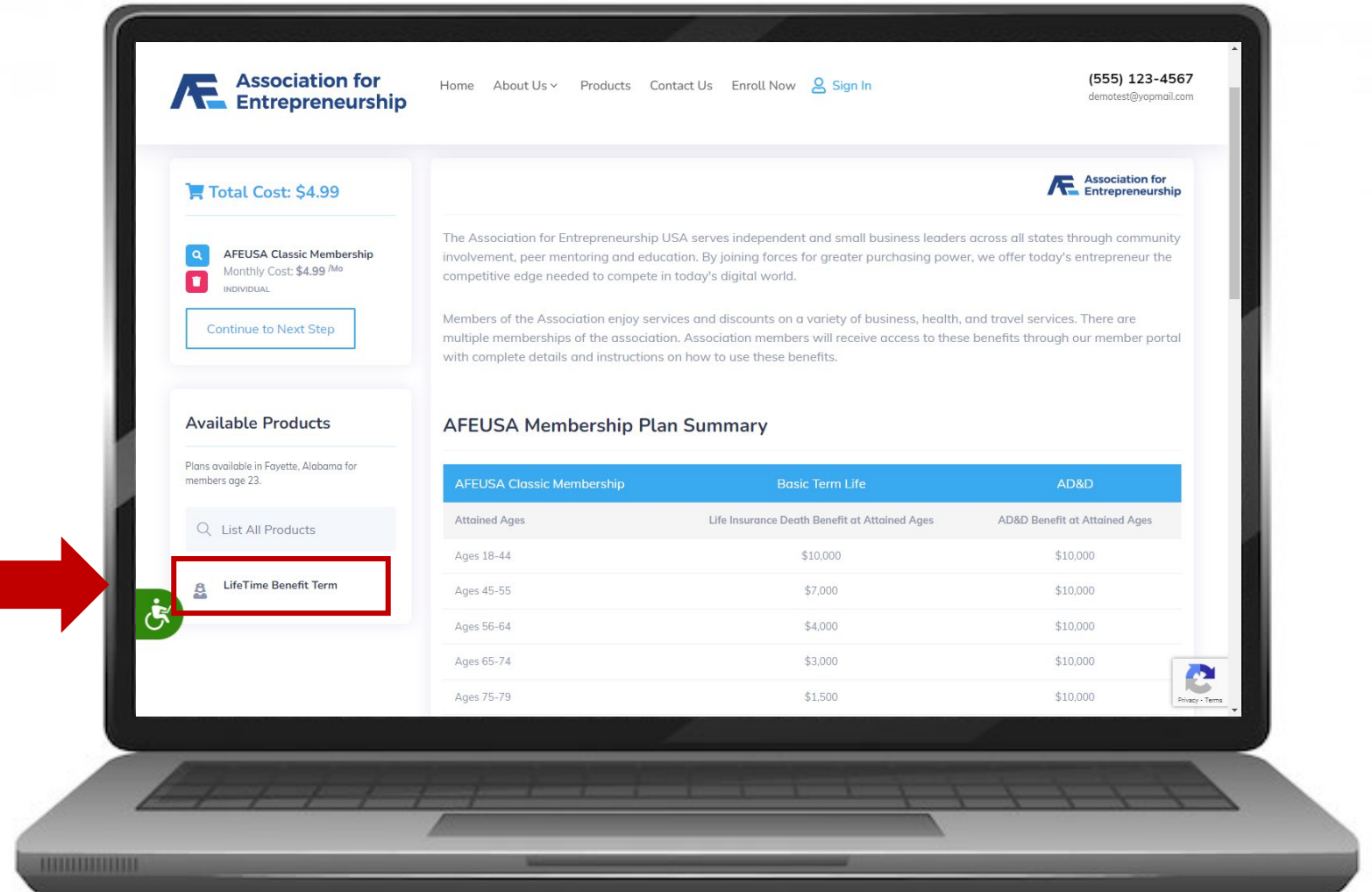
- The AFEUSA Classic Membership is now in your Cart
- Time to buy insurance – Scroll Up



Select Membership

Step 1 Continued:

- Click on LifeTime Benefit Term



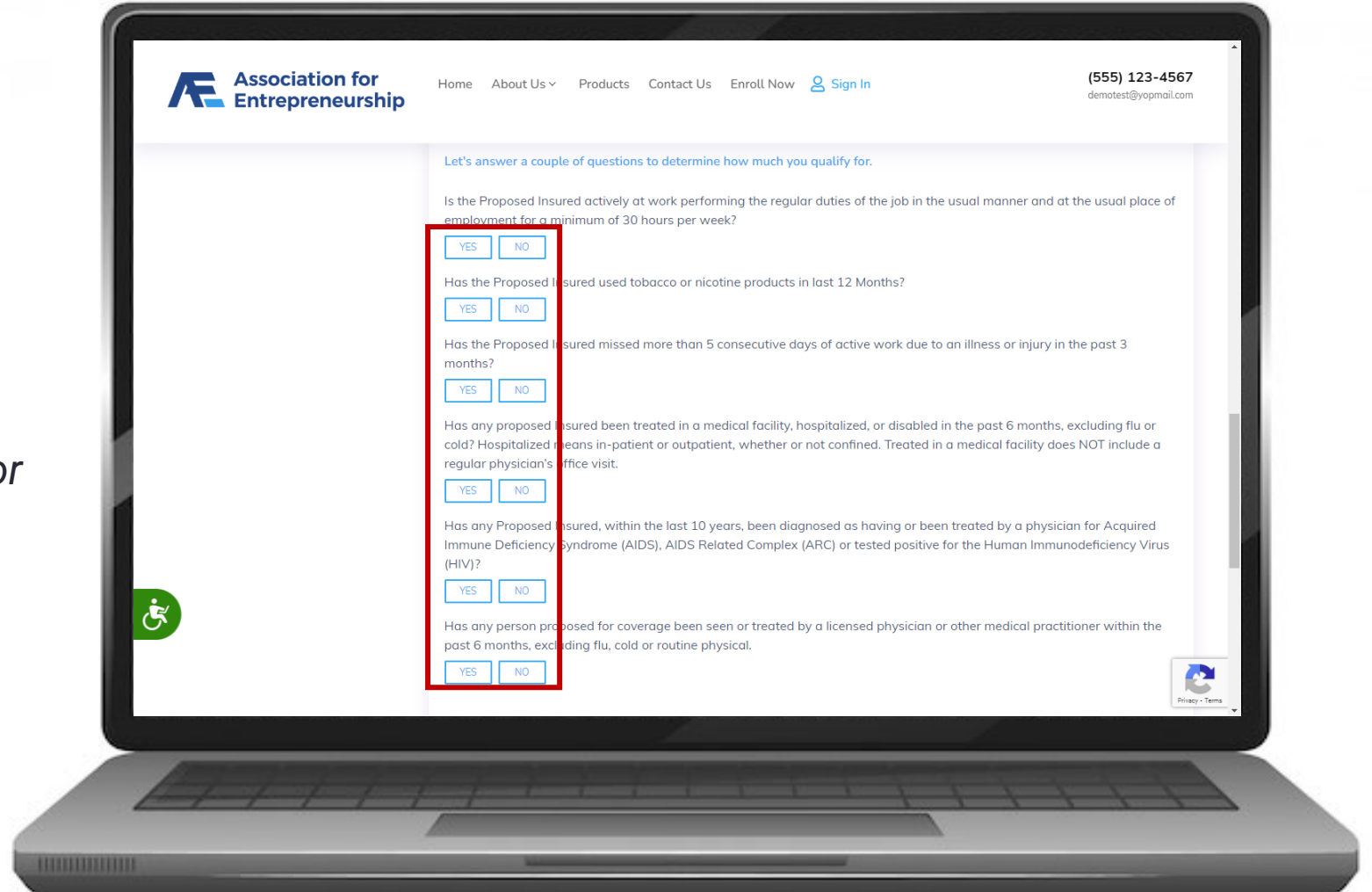
Select Membership

Step 1 Continued:

- Scroll Down
- Answer the Questions

IMPORTANT TIP

If you answer yes to any of the bottom 4 questions your client will be disqualified for coverage.



Association for Entrepreneurship

Home About Us Products Contact Us Enroll Now Sign In

(555) 123-4567
demotest@yopmail.com

Let's answer a couple of questions to determine how much you qualify for.

Is the Proposed Insured actively at work performing the regular duties of the job in the usual manner and at the usual place of employment for a minimum of 30 hours per week?

YES NO

Has the Proposed Insured used tobacco or nicotine products in last 12 Months?

YES NO

Has the Proposed Insured missed more than 5 consecutive days of active work due to an illness or injury in the past 3 months?

YES NO

Has any proposed Insured been treated in a medical facility, hospitalized, or disabled in the past 6 months, excluding flu or cold? Hospitalized means in-patient or outpatient, whether or not confined. Treated in a medical facility does NOT include a regular physician's office visit.

YES NO

Has any Proposed Insured, within the last 10 years, been diagnosed as having or been treated by a physician for Acquired Immune Deficiency Syndrome (AIDS), AIDS Related Complex (ARC) or tested positive for the Human Immunodeficiency Virus (HIV)?

YES NO

Has any person proposed for coverage been seen or treated by a licensed physician or other medical practitioner within the past 6 months, excluding flu, cold or routine physical.

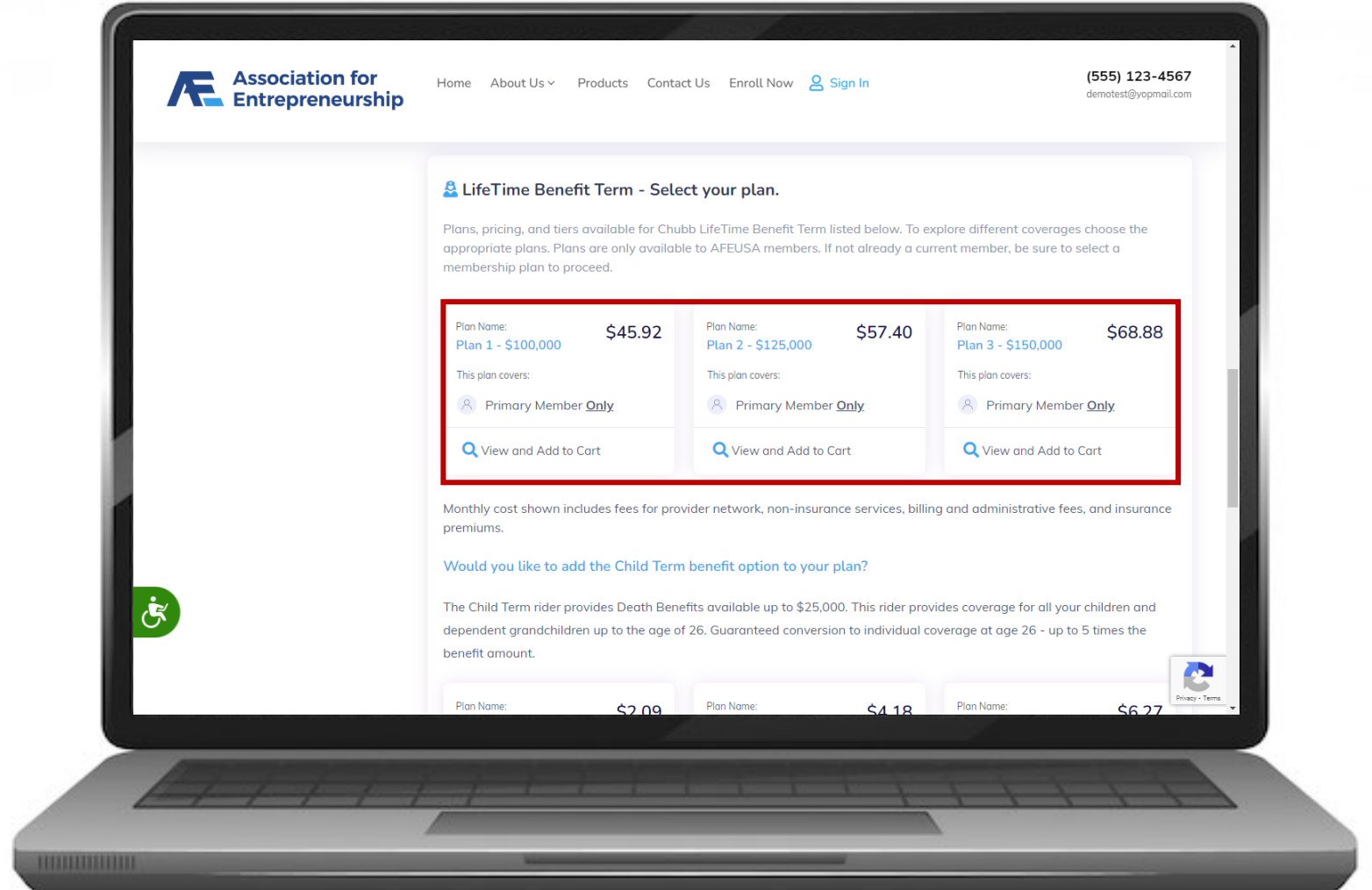
YES NO

Privacy - Terms

Select Membership

Step 1 Continued:

- Find the Plan That's Best For Your Client
- Click on View and Add to Cart



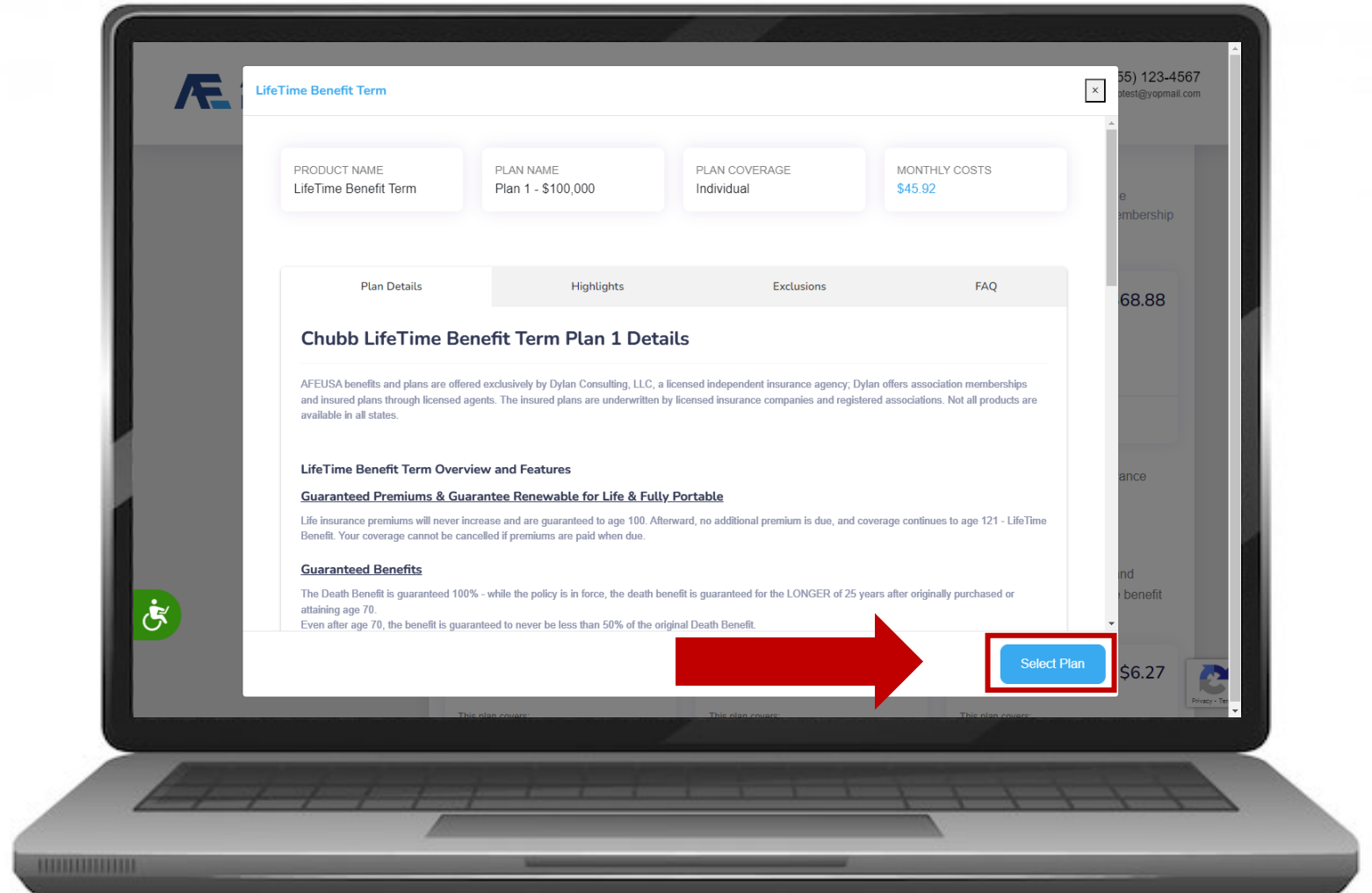
Select Membership

Step 1 Continued:

- Find the Right Plan for your Client
- Click on View and Add to Cart

IMPORTANT TIP

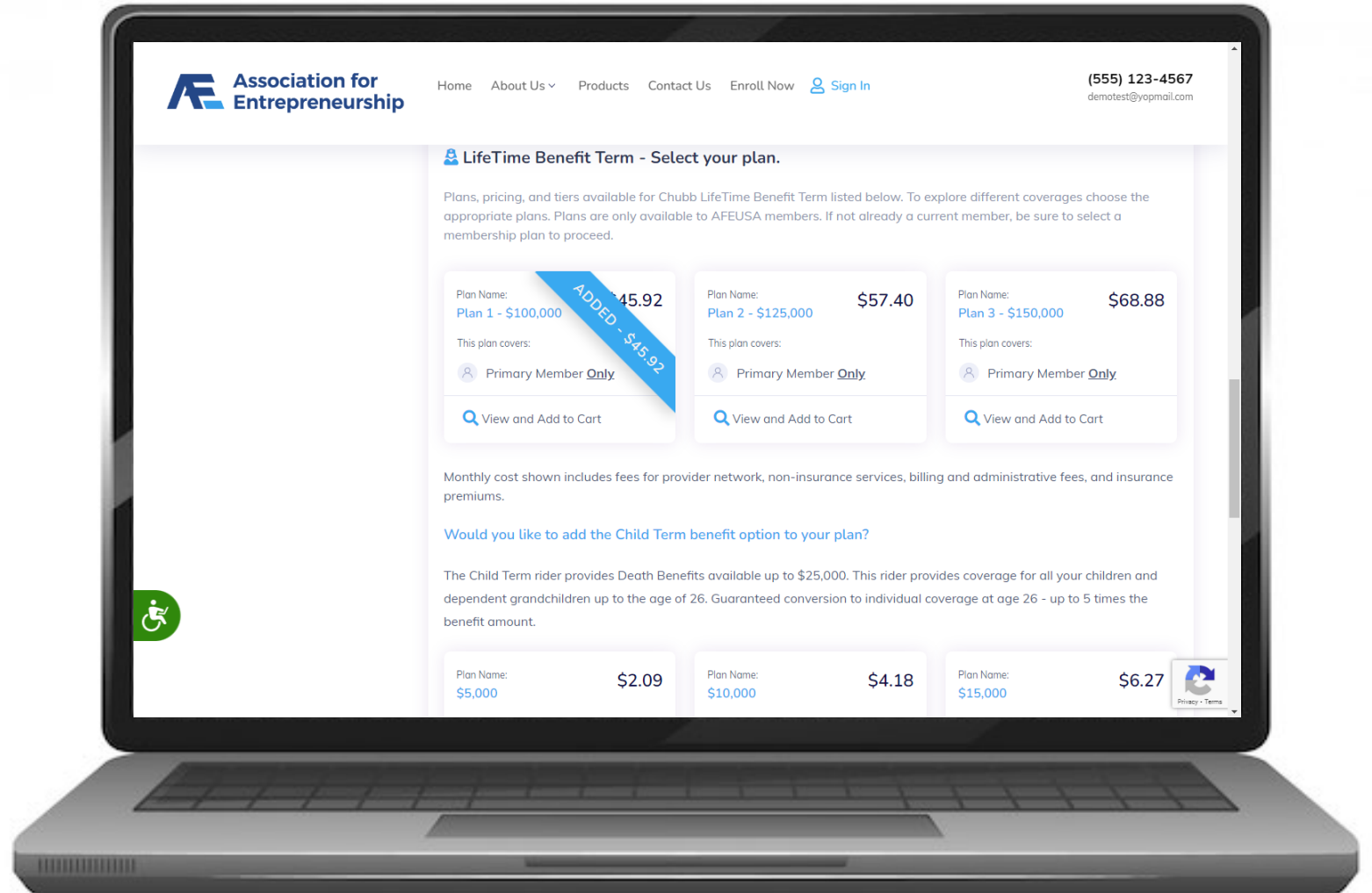
You can learn more about the product by clicking on the various tabs: Plan Details, Highlights, Disclosures, and FAQ.



Select Membership

Step 1 Continued:

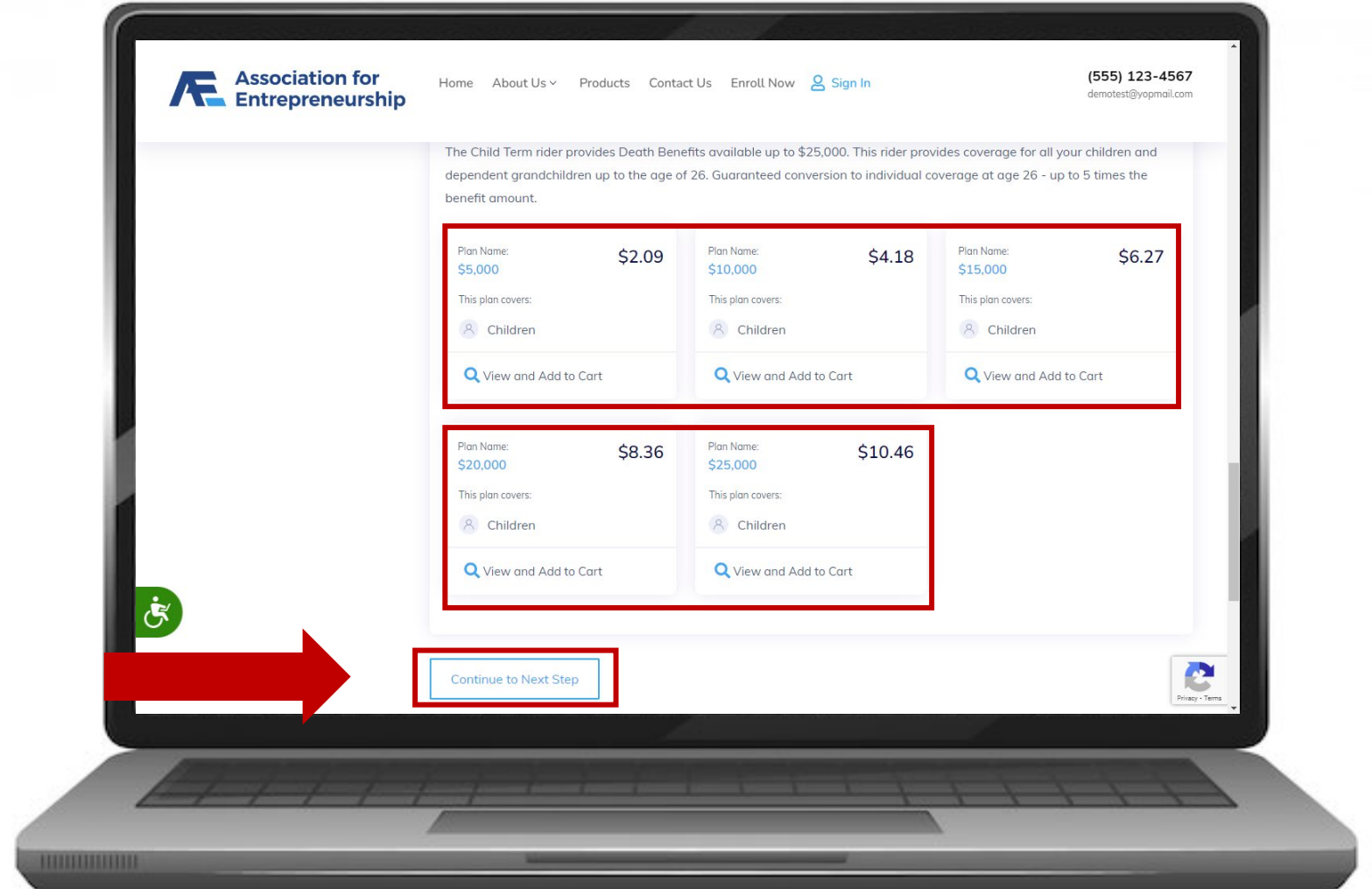
- The AFEUSA Classic Membership is now in your Cart
- Scroll Down



Select Membership

Step 1 Continued:

- **Optional: Add a Child**
- *Find the Plan That's Best For Your Client*
- *Click on View and Add to Cart*
- *Continue to Next Step*



Tell Us About You

Step 2:

- Complete the Form for the Primary Member
- First Name, Last Name, Gender, SSN, Address, City, Phone Type, Phone Number, Marital Status
- Scroll Down

Association for Entrepreneurship

Home About Us Products Contact Us Enroll Now Sign In

(555) 123-4567
demotest@yopmail.com

1 Select Membership 2 Tell Us About You 3 Review Membership 4 Payment Information

Total Cost: \$50.91

AFEUSA Classic Membership
Monthly Cost: \$4.99 /Mo
INDIVIDUAL

LifeTime Benefit Term
Monthly Cost: \$45.92 /Mo
INDIVIDUAL

Continue to Next Step

Available Products
Plans available in Fayette, Alabama for members age 23.
List All Products

Primary Member
Fill out the information below to complete your membership application.

First Name * Middle Name Last Name *

Date of Birth * Gender * SSN *

01/01/2000

Address * Address 2

City * State Zip

AL 35555

Phone Type * Phone Number * Marital Status *

Tell Us About You

Step 2 Continued:

- Answer the Questions
- Scroll Down

Association for Entrepreneurship

Home About Us Products Contact Us Enroll Now [Sign In](#) (555) 123-4567 demotest@yopmail.com

Fill out the information below to complete the enrollment into this plan:

Existing Insurance

Does any Person proposed for coverage have any life insurance in force or is any application for life insurance or reinstatement now pending?

Long Term Care (LTC) Questionnaire

Do you have another long term care policy or certificate in force (including health care service contract, health maintenance organization contract)?

Did you have any long term care insurance policy or certificate lapse during the last 12 months?

Are you covered by Medicaid?

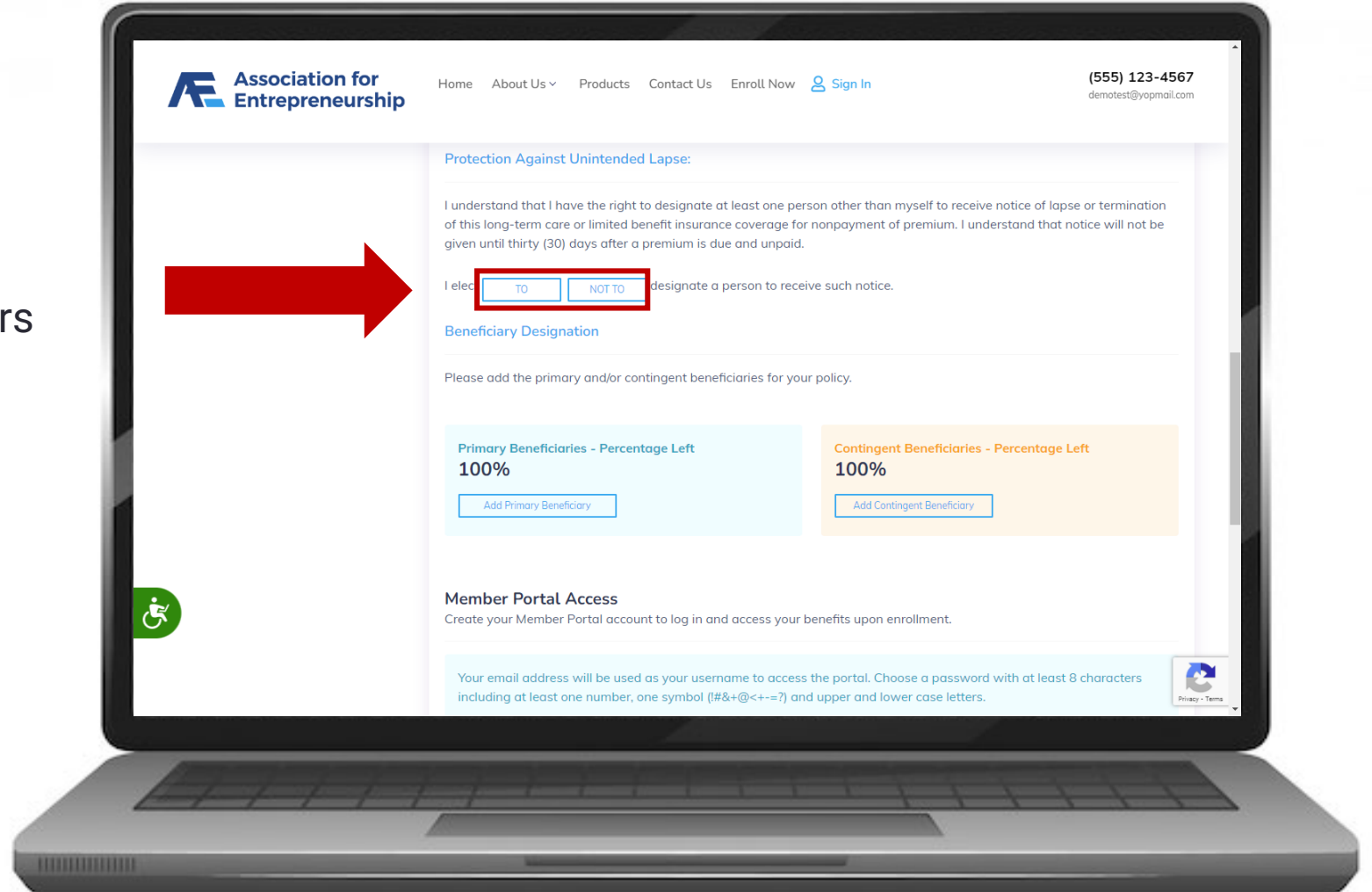
Do you intend to replace any of your medical or health insurance coverage with this Certificate?

[Privacy](#) [Terms](#)

Tell Us About You

Step 2 Continued:

- Choose if you Elect to Designate a Person to Receive a Notice
- If Yes, Complete the Form that Appears

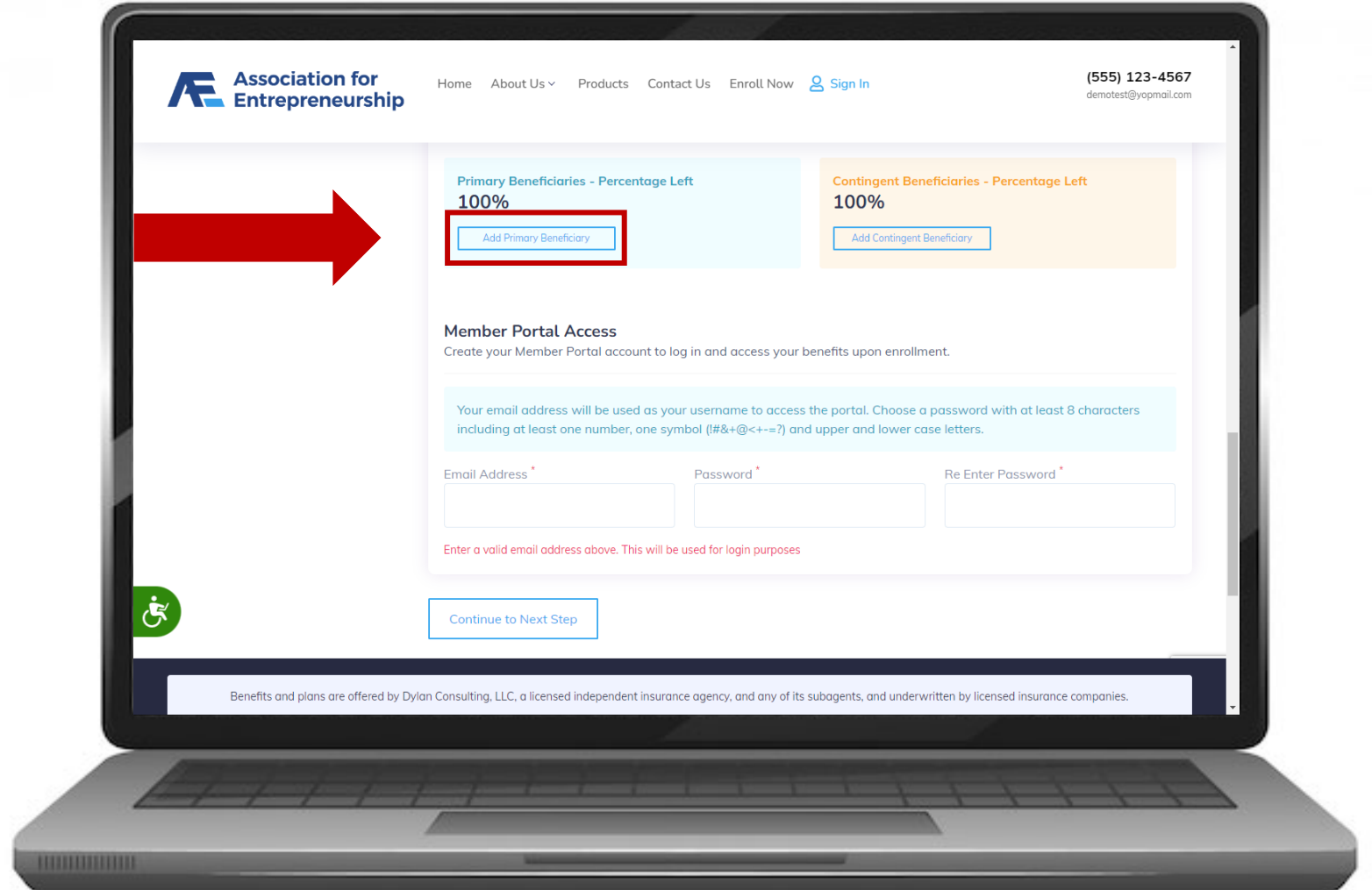


The screenshot displays the 'Association for Entrepreneurship' website interface. The top navigation bar includes links for Home, About Us, Products, Contact Us, Enroll Now, and Sign In, along with a phone number (555) 123-4567 and an email address demotest@yopmail.com. The main content area is titled 'Protection Against Unintended Lapse' and contains the following text: 'I understand that I have the right to designate at least one person other than myself to receive notice of lapse or termination of this long-term care or limited benefit insurance coverage for nonpayment of premium. I understand that notice will not be given until thirty (30) days after a premium is due and unpaid.' Below this, there is a section for 'Beneficiary Designation' with two radio buttons: 'TO' and 'NOT TO'. A red arrow points to these buttons. The 'Beneficiary Designation' section also includes a heading 'Beneficiary Designation' and a sub-heading 'Please add the primary and/or contingent beneficiaries for your policy.' There are two boxes: 'Primary Beneficiaries - Percentage Left 100%' with an 'Add Primary Beneficiary' button, and 'Contingent Beneficiaries - Percentage Left 100%' with an 'Add Contingent Beneficiary' button. At the bottom, there is a 'Member Portal Access' section with instructions on how to create an account and a note about email address usage. A green accessibility icon is visible in the bottom left corner of the page.

Tell Us About You

Step 2 Continued:

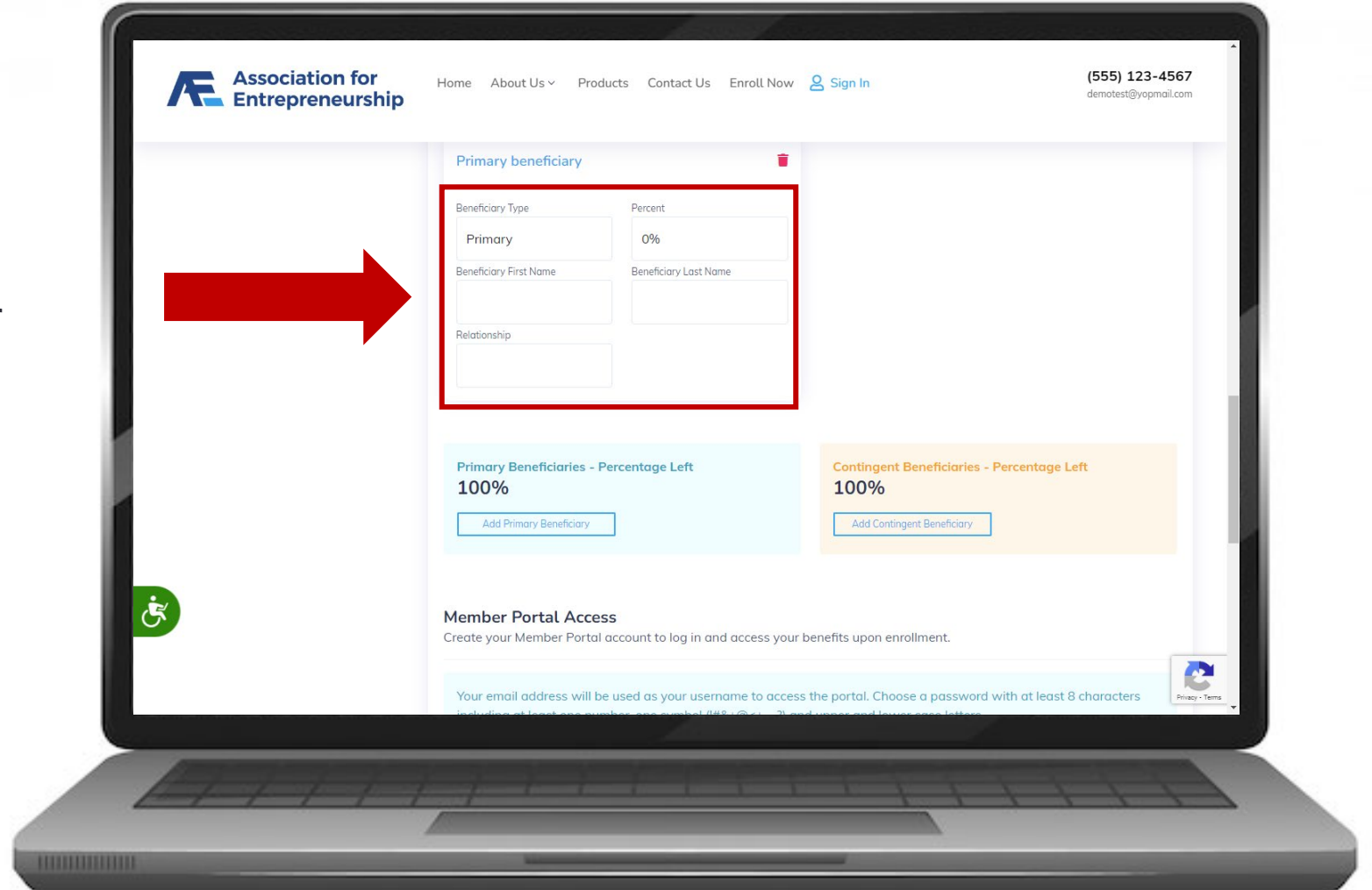
- Click on Add Primary Beneficiary



Tell Us About You

Step 2 Continued:

- Complete the Primary Beneficiary Form
- Percent – if it's not 100% add another Primary Beneficiary
- Beneficiary First Name
- Beneficiary Last Name
- Relationship



The screenshot shows the Association for Entrepreneurship website interface on a laptop. The top navigation bar includes the logo, "Home", "About Us", "Products", "Contact Us", "Enroll Now", and "Sign In". The contact information "(555) 123-4567" and "demotest@yopmail.com" is displayed in the top right corner. The main content area is titled "Primary beneficiary" and contains a form with the following fields:

Beneficiary Type	Percent
Primary	0%
Beneficiary First Name	Beneficiary Last Name
Relationship	

Below the form, there are two summary boxes:

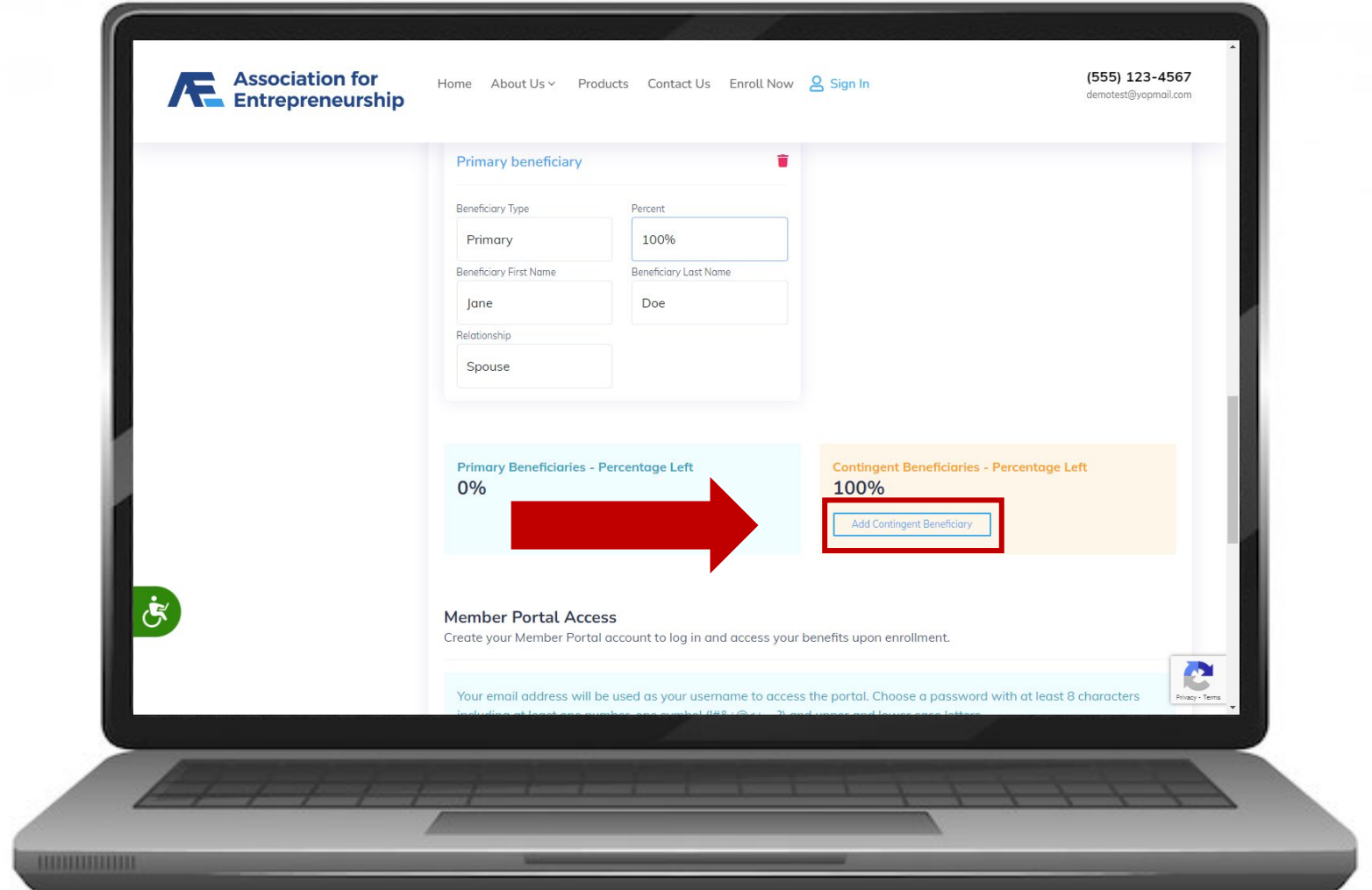
- Primary Beneficiaries - Percentage Left: 100%** with an "Add Primary Beneficiary" button.
- Contingent Beneficiaries - Percentage Left: 100%** with an "Add Contingent Beneficiary" button.

At the bottom, there is a "Member Portal Access" section with the text: "Create your Member Portal account to log in and access your benefits upon enrollment." Below this, a note states: "Your email address will be used as your username to access the portal. Choose a password with at least 8 characters including at least one number, one symbol (#, @, \$, %) and upper and lower case letters." A "Privacy - Terms" link is visible in the bottom right corner.

Tell Us About You

Step 2 Continued:

- Click on Add Contingent Beneficiary



Tell Us About You

Step 2 Continued:

- Complete the Contingent Beneficiary Form
- Percent – if it's not 100% add another Contingent Beneficiary
- Beneficiary First Name
- Beneficiary Last Name
- Relationship

The screenshot displays the 'Association for Entrepreneurship' website interface. At the top, the logo and navigation menu are visible. The main content area is divided into two columns: 'Primary beneficiary' and 'Contingent beneficiary'. The 'Primary beneficiary' section shows a form with 'Jane' as the beneficiary and '100%' as the percentage. The 'Contingent beneficiary' section is highlighted with a red box and shows '0%' as the percentage. A red arrow points from the 'Primary beneficiary' section to the 'Contingent beneficiary' section. Below the forms, there are summary boxes for 'Primary Beneficiaries - Percentage Left 0%' and 'Contingent Beneficiaries - Percentage Left 100%'. A 'Member Portal Access' section is also visible.

Beneficiary Type	Percent
Primary	100%
Contingent	0%

Beneficiary Type	Percent
Primary	0%
Contingent	100%

Tell Us About You

Step 2 Continued:

- Complete the Contingent Beneficiary Form
- Percent – if it's not 100% add another Contingent Beneficiary
- Beneficiary First Name
- Beneficiary Last Name
- Relationship

The screenshot displays the 'Association for Entrepreneurship' website interface. At the top, the logo and navigation menu are visible. The main content area is divided into two columns: 'Primary beneficiary' and 'Contingent beneficiary'. The 'Primary beneficiary' section shows a form with 'Jane' as the beneficiary and 100% ownership. The 'Contingent beneficiary' section is highlighted with a red box and shows 0% ownership. A red arrow points from the 'Primary beneficiary' section to the 'Contingent beneficiary' section. Below the forms, there are summary boxes for 'Primary Beneficiaries - Percentage Left 0%' and 'Contingent Beneficiaries - Percentage Left 100%'. A 'Member Portal Access' section is also visible.

Beneficiary Type	Percent
Primary	100%
Contingent	0%

Beneficiary Type	Percent
Primary	0%
Contingent	100%

Tell Us About You

Step 2 Continued:

- Create Your Client's Login Info
- Email Address
- Password
- Re-enter Password
- Click on Continue to Next Step

The screenshot shows the 'Member Portal Access' section of the Association for Entrepreneurship website. At the top, there is a navigation bar with the logo and links for Home, About Us, Products, Contact Us, Enroll Now, and Sign In. The contact information (555) 123-4567 and demotest@yopmail.com is also visible. Below the navigation bar, there are two summary boxes: 'Primary Beneficiaries - Percentage Left 0%' and 'Contingent Beneficiaries - Percentage Left 0%'. The main content area is titled 'Member Portal Access' and includes a sub-header 'Create your Member Portal account to log in and access your benefits upon enrollment.' A light blue box contains instructions: 'Your email address will be used as your username to access the portal. Choose a password with at least 8 characters including at least one number, one symbol (!#&+@<+?=?) and upper and lower case letters.' Below this are three input fields: 'Email Address *', 'Password *', and 'Re Enter Password *'. A red box highlights these three fields. Below the fields is a red error message: 'Enter a valid email address above. This will be used for login purposes'. At the bottom of the form is a 'Continue to Next Step' button, which is also highlighted with a red box. A large red arrow points from the left towards this button. At the very bottom of the page, there is a footer with the text: 'Benefits and plans are offered by Dylan Consulting, LLC, a licensed independent insurance agency, and any of its subagents, and underwritten by licensed insurance companies.'

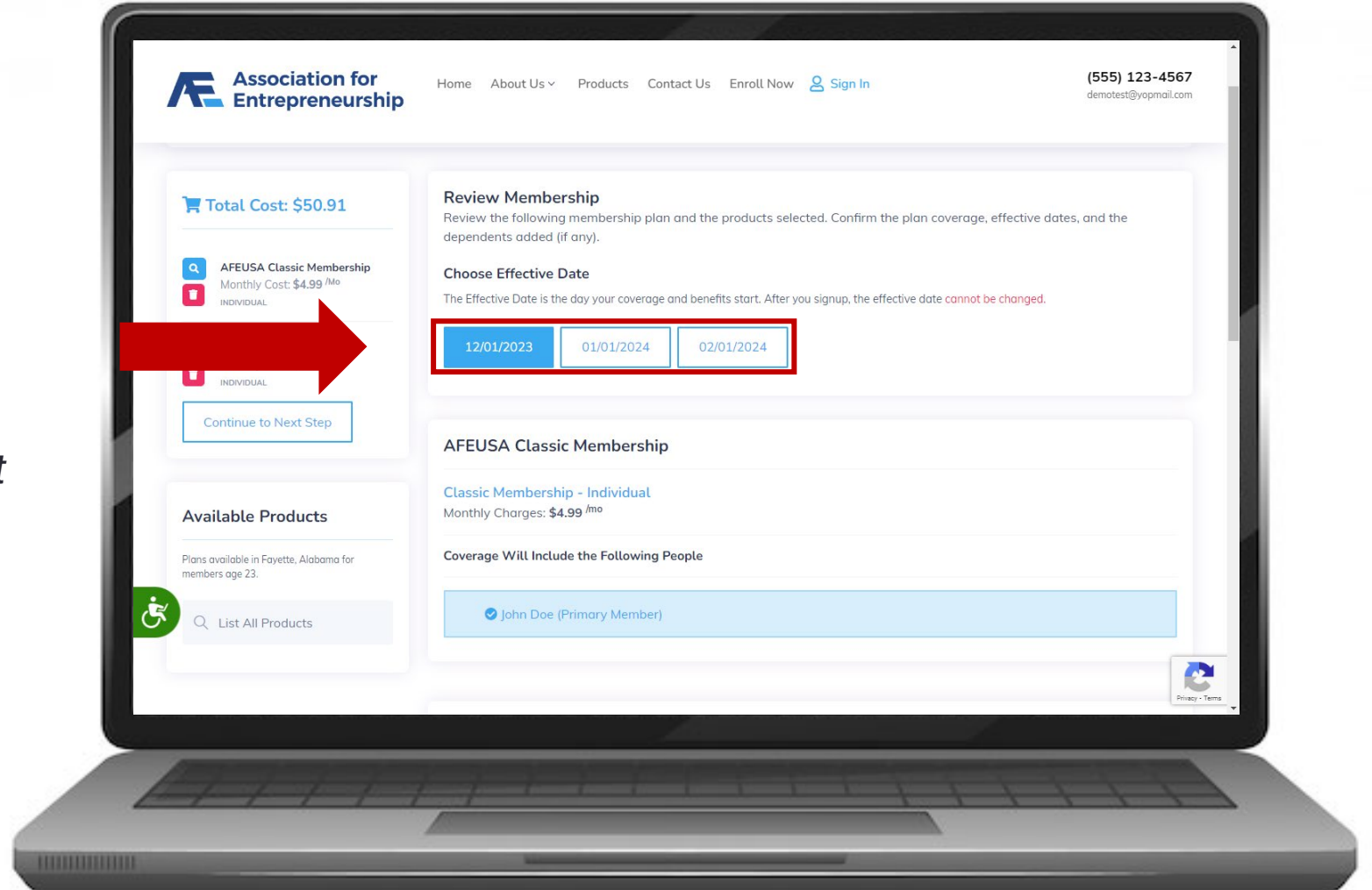
Review Membership

Step 3:

- Choose Effective Date
- Scroll Down

IMPORTANT TIP

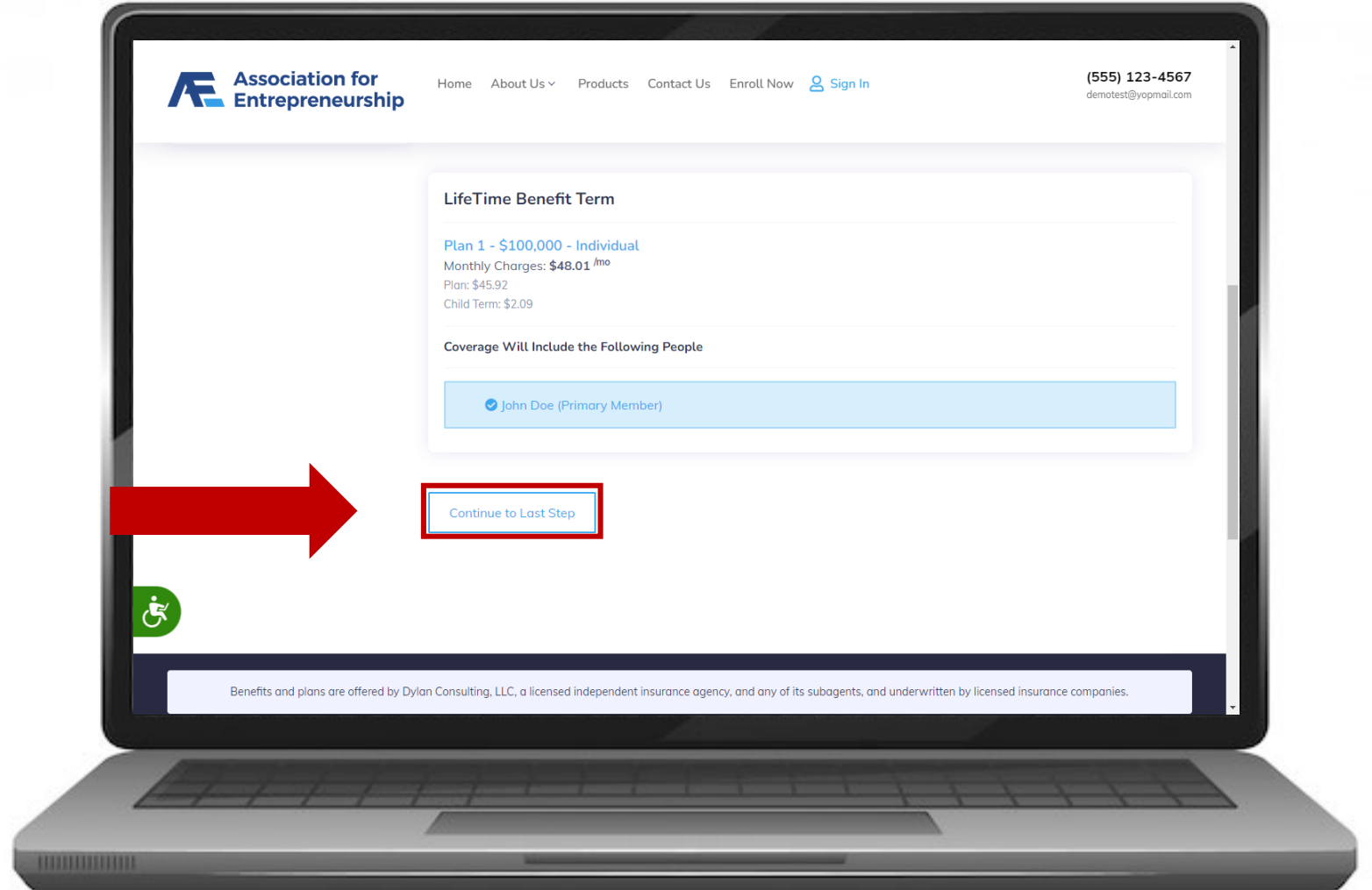
If you enroll on or after the 21st the earliest effective date will be 2 months away.



Review Membership

Step 3 Continued:

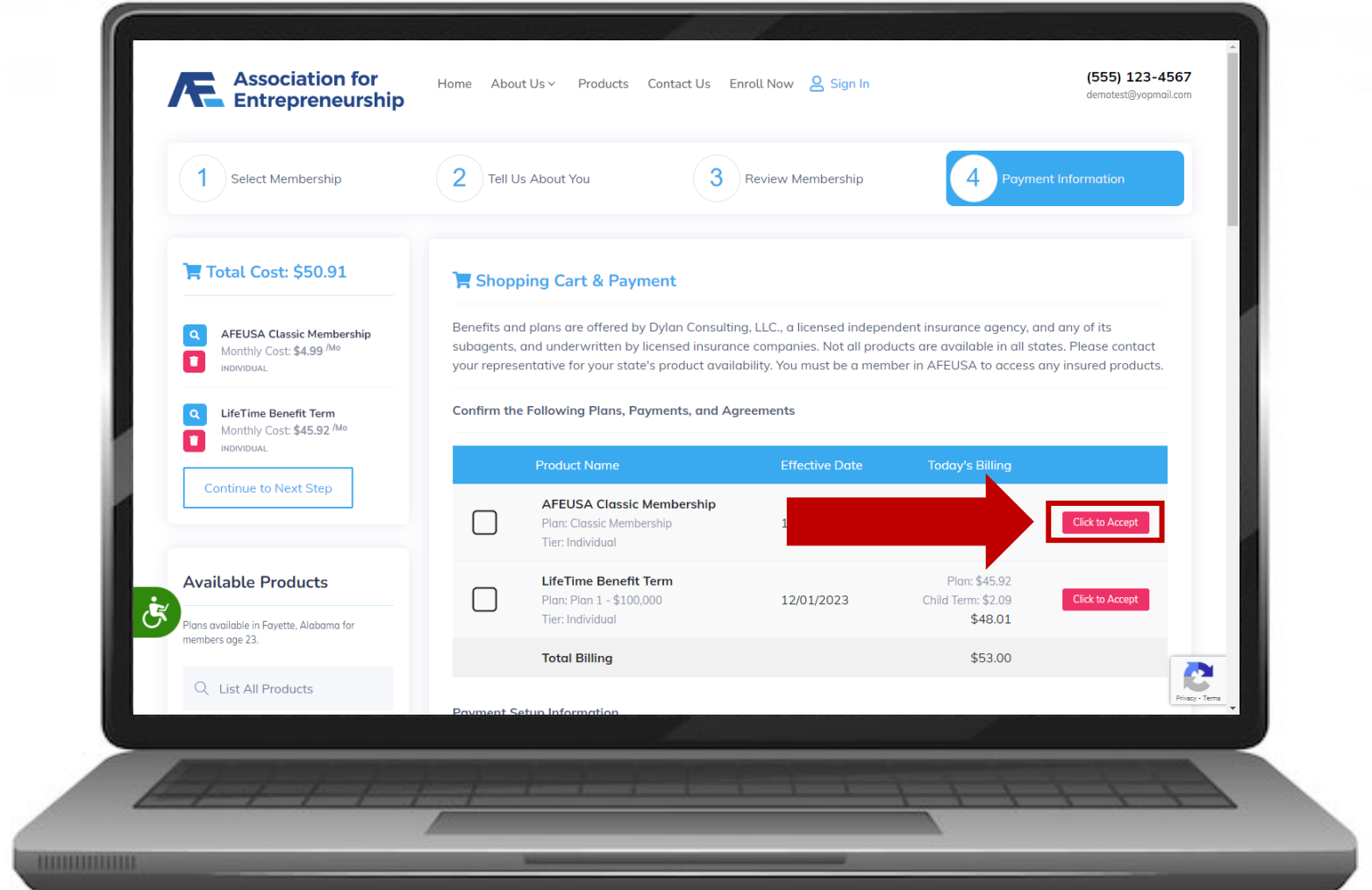
- Click on Continue to Last Step



Payment Information

Step 4:

➤ Click on Click to Accept



Payment Information

Step 4:

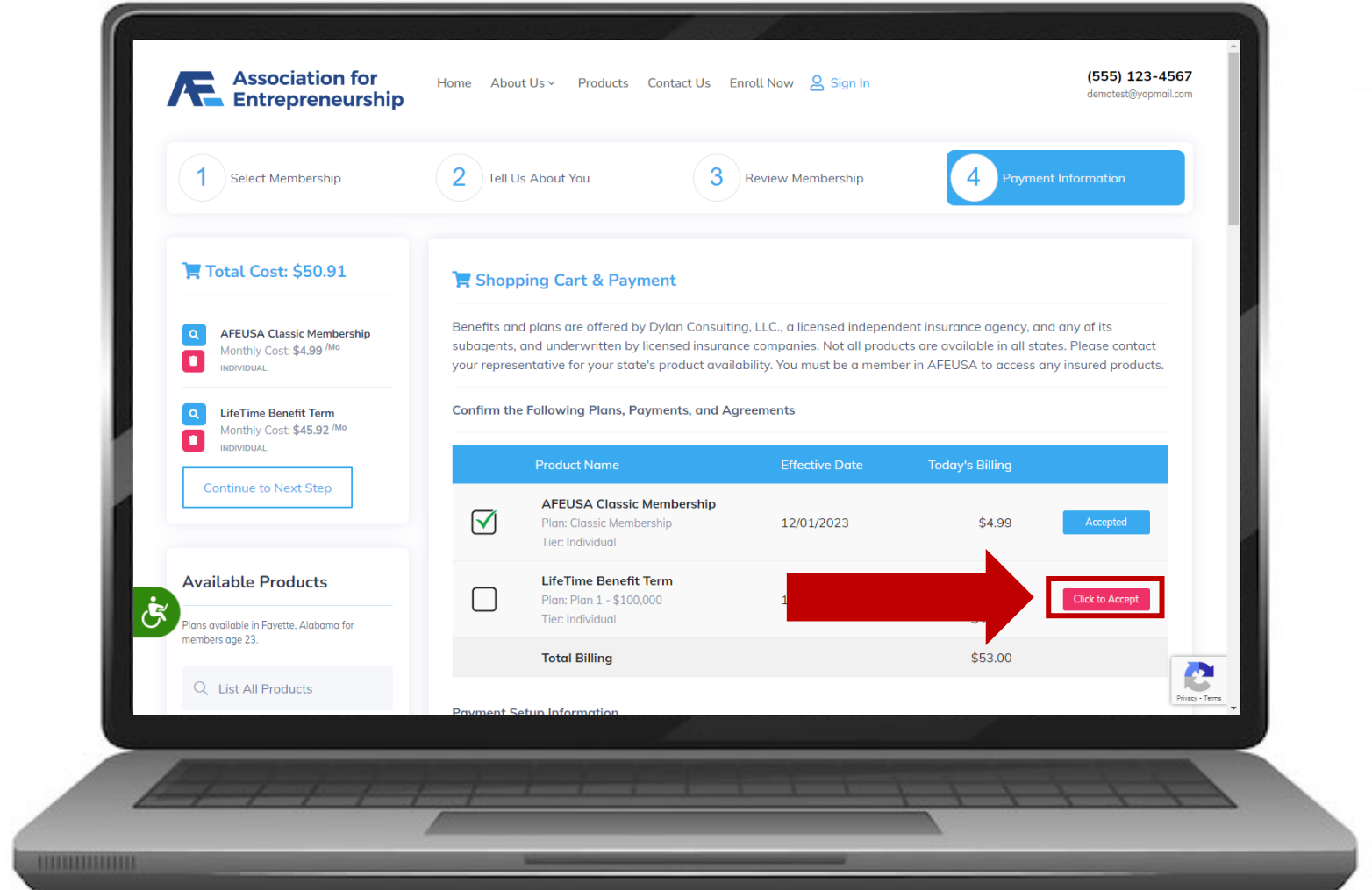
- Click on the Checkboxes
- Scroll Down there are more
- Click on Close Terms



Payment Information

Step 4:

➤ Click on Click to Accept



Payment Information

Step 4:

- Click on the Checkbox
- Click on Close Terms
- Scroll Down



Payment Information

Step 4 Continued:

- Input Payment Info
- Input Billing Address
- Scroll Down

The screenshot shows a laptop displaying the Association for Entrepreneurship website's payment form. The page header includes the logo, navigation links (Home, About Us, Products, Contact Us, Enroll Now, Sign In), and contact information ((555) 123-4567, demotest@yopmail.com). A blue notification bar states: "We will debit the amount of \$53.00 from your debit/credit card. Please look for an AFEUSA debit on your statements." The form contains several input fields: "First Name on Card", "Last Name on Card", "Credit/Debit Card Number", "Expiration" (mm/yy), "Security Code", "Address", "City", "State", and "ZIP Code". A checkbox labeled "Copy address from Member Information." is present. A red rectangular box highlights the card information fields. A green accessibility icon is visible on the left side of the laptop screen.

Payment

Step 4 Continued:

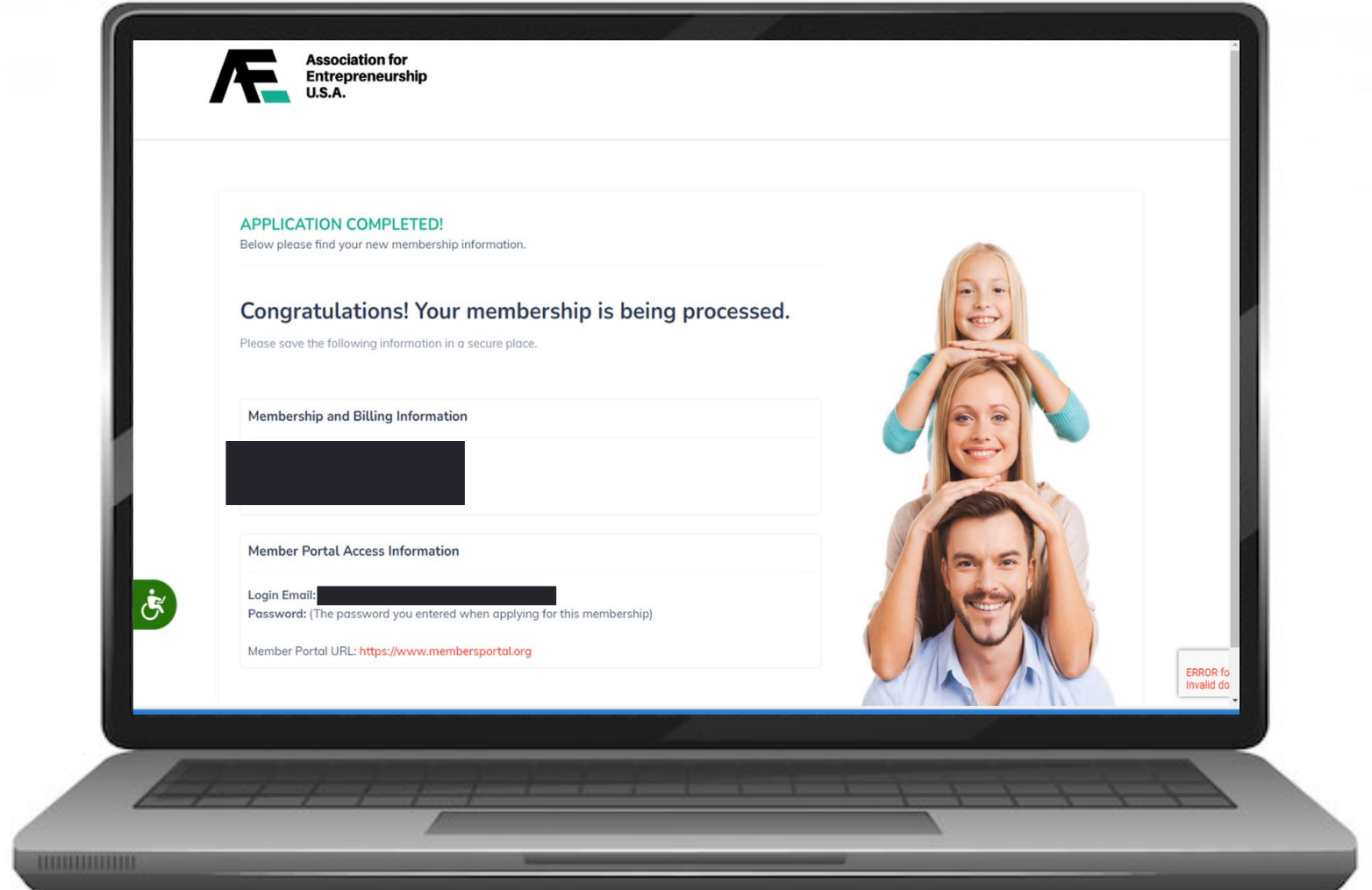
- Agree to the Terms – Bottom one is Optional
- Complete the reCAPTCHA
- Click on Buy Now



Payment

Congratulations!

- Member Portal
- www.membersportal.org



Thank you!

Questions?

(651) 395-4375

chubb@goldencareusa.com

