Benefits and Wellness

2016 Presentation Registration Form

Starts at 9:30 a.m.

To enroll your new employee(s) in a Benefits and Wellness presentation, please complete this form and e-mail it to benefitsservice@mail.maricopa.gov or FAX to (602) 506-2354 NO LATER THAN NOON on the Thursday prior to a scheduled Benefits and Wellness presentation.

The Benefits and Wellness Presentation Registration Form is only to be used to register for the Benefits and Wellness presentation. If the employee will be attending the regular County NEO, continue to use the current registration process.

Presentation Date: _____

HR Liaison Name and Phone Number: _____

Dept. #	Employee Name (Last, First)	Employee ID#	Job Title	Hire Date	Worksite Name and Address

Employee Benefits Division | 301 W. Jefferson St., Suite 3200, Phoenix, AZ 85003
602.506-1010 | 602.506.2354 | benefitsservice@mail.maricopa.gov