



# Sales Agent Agreement

Please fill out the top and bottom portions of this Sales Agreement in the areas that apply to you and your agency. Send or fax it to the appropriate Sales Representative. If you are not a member of a consortium, please **Click Here** or call 1-800-527-7478.

**No payment will be made if incomplete or incorrect information is submitted**

<b>Individual / Company Name</b> (As it should appear on all records)		<b>Federal Tax ID # or SSN</b> (No payment paid without this information)	
<b>Owner / Manager Name</b>	<b>Contact Name</b>	<b>Contact Email Address</b>	
<b>Remitting Address</b> (Commissions sent to this address)	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Physical Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Telephone</b>	<b>Fax</b>	<b>IATAN#</b> (if applicable)	<b>Consortium / Franchise</b> (if applicable)

This Agreement is made and entered into as of the date shown below, by and between Medjet Assistance, LLC (MedjetAssist), and the individual or company listed above. It is understood that, the individual or company listed above desires to represent and sell the MedjetAssist membership program to its individual and group clients. MedjetAssist reserves the right to change and/or amend these benefits and rate structure without prior written notice.

The sales agent and/or company shall: 1) agree to represent the MedjetAssist membership program as it is outlined in the marketing literature to their existing clients, as well as any future clients that they consider qualified prospects for the program, and 2) represent the MedjetAssist benefit program and rate structure as it is written. It is understood that the MedjetAssist program is not insurance, and that the membership benefits and rates are not to be modified in any way without first being approved by MedjetAssist. It is further understood that if the program benefits or rate structure are represented in any other way than that approved by MedjetAssist, this agreement will be canceled, and any outstanding commissions will be withheld

MedjetAssist shall: 1) **pay the company/sales agent a commission of XX% for each new enrolled individual or family membership, and pay the company/sales agent a commission of XX% for each individual or family renewal, if company/sales agent remains in an active status based on MedjetAssist's current requirements**, and 2) supply the company/agent with all the necessary marketing support materials such as, but not limited to brochures, enrollment forms and agency handbooks and 3) provide marketing personnel to assist with any large group meeting in order to facilitate the enrollment of the company/sales agent's group clients, as determined to be necessary by both MedjetAssist and the company/sales agent and 4) process all enrollment applications in a timely manner and 5) agree to provide each member with an explanation of the services to be provided and 6) provide the company/sales agent with a regular report showing the previous membership activity with an appropriate commission check.

MedjetAssist will send commission reports and checks between the 15<sup>th</sup> and 20<sup>th</sup> of the following month. Please note that commissions are paid based on the effective date of membership, not the date paid. Should the amount due be less than \$100, the company/sales agent will be paid at the end of the quarter, or when the company/sales agent reaches commissions worth \$100 - whichever comes first.

MedjetAssist offers members the option of purchasing multi-year memberships. Membership fees beyond the first year are held in escrow and utilized in subsequent years to extend the membership one year at a time. Sales agent commissions for multi-year memberships are pro-rated over the period of the membership. Commission on the first year portion of the new membership is paid at XX%. Commissions on subsequent years of the multi-year membership are paid annually at XX%.

Upon completion and approval of this sales agreement, a sales tracking number will be assigned to the above company/sales agent. Please make sure all materials you receive from MedjetAssist have this tracking number clearly in place. When enrolling by phone or over the internet, it always the agent's responsibility to provide this tracking number, as a reference. All commissions are paid based on this tracking number.

This agreement may not be assigned or transferred, nor may any of the obligations of either party hereunder be delegated by either party without the prior written consent of the other, and any such assignment without such consent shall be null and void. This agreement shall remain in force for one year from the date hereof and may be automatically renewed for successive one-year terms if the company/agent maintains an active sales status. Either party has the right to terminate this agreement by providing the other party 30 days advance written notice. Terms and conditions contained within this Sales Agent Agreement are subject to change without prior written notice.

The parties hereto have duly executed this agreement in duplicate as of this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

**Individual / Owner / Manager**

**MedjetAssist**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_