

## EAP Client Company Enrollment Form

National Energy and Fuels Institute Inc.  
P.O. Box 822. Wilmington, MA 01887  
Fax: 202-331-3759 Email: [benefits@nefi.com](mailto:benefits@nefi.com)

### Company Information

Company Name	Company Contact Name	Company Contact Email	
Company Street Address	Company City	Company State	Company Zip Code
Company Main Phone Number	Company Fax Number	Company Total Number of Employees	
Company Website	Company Operate in More Than One State?	Effective Start Date of Program	

### Company Key Contacts

AP Contact Name	
AP Contact Email	
AP Contact Phone	
Human Resources Contact Name (EAP Contact)	
Human Resources Contact Email (EAP Contact)	
Human Resources Contact Phone (EAP Contact)	

### Filer

Printed Name of Filer	Signature of Filer	Date

**RETURN FORM TO [BENEFITS@NEFI.COM](mailto:BENEFITS@NEFI.COM)**

QUESTIONS? Please contact [benefits@nefi.com](mailto:benefits@nefi.com) or call 617-924-1000

\*\*\*Please note your Coastline EAP service will automatically renew annually in February. Your annual enrollment is February 1- January 31. For Cancellation of your enrollment please email [benefits@nefi.com](mailto:benefits@nefi.com). Cancellation after February 28<sup>th</sup> will not be refunded.