

Log In

Email

First time? New user?

[Register Here](#)

Password



☐ Remember Username

[Forgot Password?](#)

Log In

The first step in registration is to enter your email address.

Register

Email*

Save

Register

Email test30@gmail.com

First Name *

Last Name *

Social Security # *

Street Address *

City *

Zip Code *

Home Phone

Cell Phone *

Cell Provider *

Primary Language *


Employer *

Job *

Is spouse a Local 2 member? *

Register

Enter all of the information on this page and make sure that you have entered your correct email address. It is also very important that you enter your cell phone correctly and select the correct cell provider. We use this information to send you important messages.

After you have entered the required information, click the  button.

Registration Confirmed

Congratulations! You have successfully registered as a user. You will receive an email shortly to confirm your email address. Please follow the instructions in that email for next steps.

If you don't see an email in your Inbox, don't forget to check your Junk/Spam folder. If you don't receive an email within 15 minutes, please contact us at ChildElderPlan@local2benefits.org.

OK

Account Confirmation


You are now registered as a user in the system. Please create a password. A password must be between 8-32 characters and contain at least one upper case letter, one lower case letter, one number, and one special character(!@#\$%^&*)

Password*



Confirm Password*

Save

Once you create a password, click  and you should see the following pop-up message:

Account Confirmed



Your password has been saved and the creation of your account is complete. Please log in to continue.

OK

Local 2 Hospitality Industry Child & Elder Care Plan

Language English ▾

Log In

Email

paulgehrman@hotmail.com

First time? New user?

[Register Here](#)

Password

.....



☐ Remember Username

[Forgot Password?](#)

Log In

Enter your email address and the password you just created. Then, click .

Local 2 Hospitality Industry Child & Elder Care Plan

Language English ▾

Log In


Your account is protected with Multi-Factor Authentication. We have sent an authentication code to (***) ***-5869. Enter this code to verify your account.

If you do not receive a code within 10 minutes, please contact us by email at ChildElderCare@local2benefits.org.

Authentication Code



Verify

This screen provides “Multi-Factor” authentication. This adds an extra level of security to your account. A six-digit code will be texted to you. Enter that six-digit code here and then click  to continue. If you entered the correct code, then you will be directed to your Member Page.

Local 2 Hospitality Industry Child & Elder Care Plan

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Jerry Seinfeld - Member Page

In order to receive benefits, the first thing you need to do is apply. Click the button below to begin the process.

[Apply for Benefits](#)

Your Member Page provides the status of your application, and whether you have been granted benefits. The first step is to click the

[Apply for Benefits](#)

button in order to start the process.

Apply for Benefits

[Benefit Choices](#)[Primary Benefit](#)[Additional Benefit](#)[Required Documents](#)[11th Grade/ScholarMatch](#)[Acknowledge & Submit](#)[Staff Notes](#)

Primary Benefit

Benefit*

Elder/Disabled Care ▾

Relative First Name*

Jimbo

Relative Last Name*

Fisher

Relative Date of Birth*

04/01/2022

Relative Social Security #*

343-43-4343

Relationship to You*

Spouse/Partner ▾

Zip Code

12345[Save](#)

ELDER/DISABLED CARE

\$160/Month

- Reimburses expenses for caregiving of a disabled child 13 years or older, disabled spouse, domestic partner, parent, current step parent or parent-in-law, or grandparent.
- Reimbursable services must be related to the health or well-being of the elder/disabled adult or child.
- Offers counseling and referral services related to care for elders or disabled relatives.

Local 2 Hospitality Industry Child & Elder Care Plan

LanguageEnglish

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Hello Kurt

Apply for BenefitsBenefit Choices

Primary BenefitAdditional BenefitRequired Documents11th Grade/ScholarMatchAcknowledge & SubmitStaff Notes

Additional Benefit (Optional)

Benefit*Newborn

Relative First Name*

Relative Last Name*

Relative Date of Birth*mm/dd/yyyy

Relative Social Security #*

Relationship to You*

Save

NEWBORN
Up to 12 months
\$125/Month

- Reimburses expenses for child care or supplies during the first year of life.
- Covers child care inside or outside the parent's home.
- Apply for and receive this benefit in addition to another benefit.

If you want to apply for an Additional Benefit, you will do so here. After that, click on the

Required Documents

 tab above and you'll see a list of the required documents that must be uploaded in order to approve your application and grant benefits.

Local 2 Hospitality Industry Child & Elder Care Plan
Language
English

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Hello Kurt

Apply for Benefits
Benefit Choices

Primary Benefit
Additional Benefit
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Acknowledge & Submit
Staff Notes

Primary Benefit	Additional Benefit	Document Type	Uploaded File	
Elder/Disabled Care		Elder/Disabled Relative Qualification Form ⓘ	[missing]	
Relative	Jimbo Fisher	Proof of Address ⓘ	[missing]	
		Social Security Card ⓘ	tc_logo.png	
		Birth Certificate ⓘ	Schedule-3.pdf	
		Marriage Certificate ⓘ	[missing]	

Newborn		Birth Certificate ⓘ	[missing]	
Relative	Patty Jones	Social Security Card ⓘ	[missing]	



Click the Upload button and this will bring up the Upload Document popup.

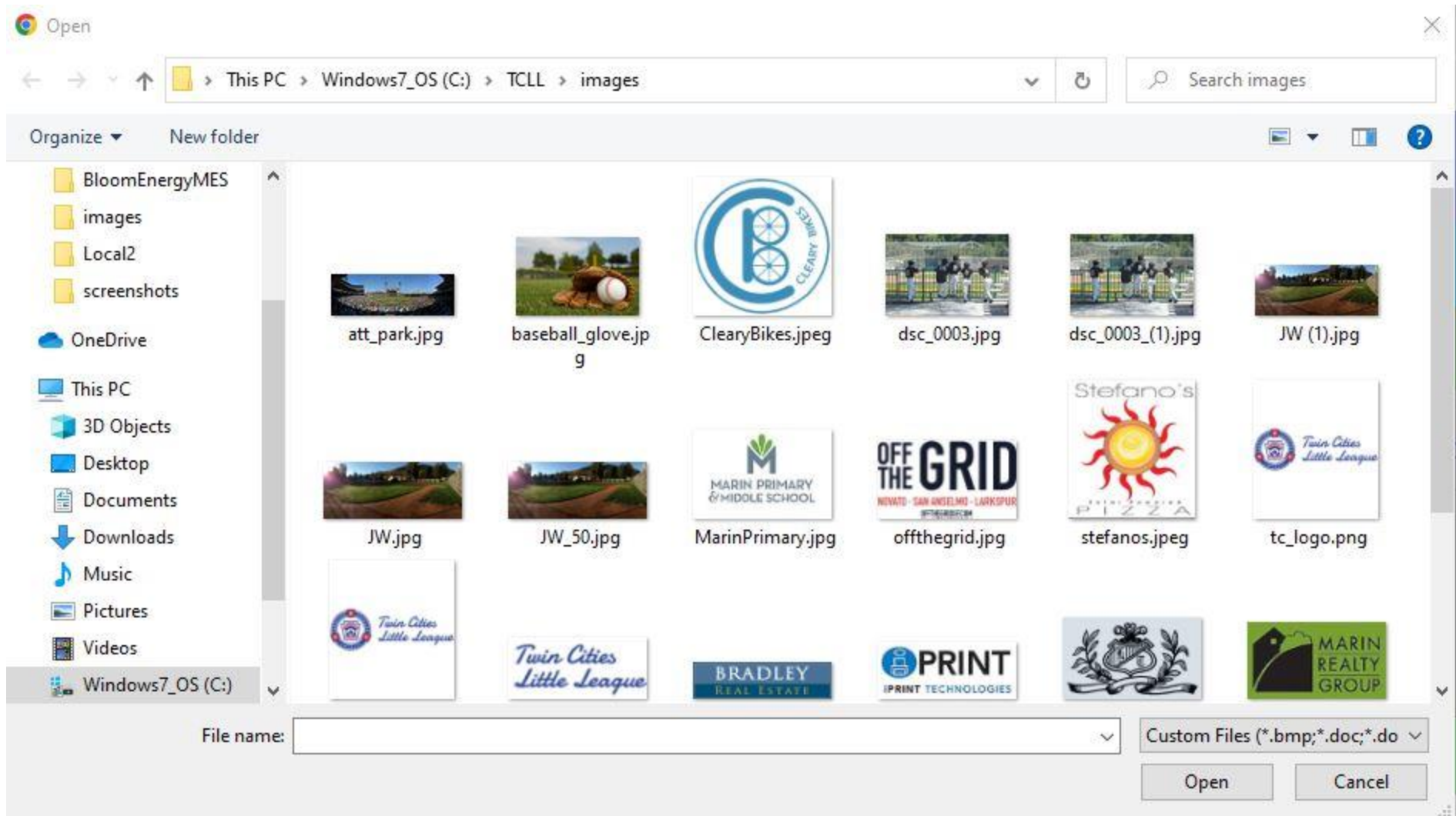
Upload Document
X

Choose File
No file chosen

Cancel

Choose File

Click the button and this will display a popup giving you access to the local files on your computer or phone. This screen should look something like this:



You need to find and select the file you want to upload and then click

Open

. This will activate the

Upload

button on the popup.

Upload Document



Choose File offthegrid.jpg

Upload

Cancel

Upload

Click **Upload** and the document will be uploaded to the web server where we can review it. In order to submit your application, you must upload all required documents.

Apply for Benefits

Benefit Choices

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11th Grade/ScholarMatch

Relative First Name*

Relative Last Name*

Relative Date of Birth*

mm/dd/yyyy



Relative Social Security #*

Relationship to You*

Relative Email

Relative Cell Phone

Relative Cell Provider

High School Grad Year*

2024

[Save](#)**ScholarMatch**

In the spring of students' 11th grade year, they are eligible to apply to the Destination College program, sponsored by our college partner ScholarMatch. Destination College pairs students with a college coach who can assist with college selection, applications, and financial aid in students' 12th grade year.

Application is a two-part process:

1. Students apply to Destination College on ScholarMatch's website: scholarmatch.org (Spring)
2. Parents apply for the College Prep & Counseling benefit on the Child & Elder Care Plan's website: local2benefits.org (Summer)

Every spring the Child & Elder Care Plan holds a meeting to introduce Destination College to parents and students. If you have a student who will be in 11th grade in the Fall of 2022, and would like to be invited to this meeting and receive ongoing information about the ScholarMatch program, please complete the information on this tab.

Local 2 Hospitality Industry Child & Elder Care Plan

LanguageEnglish

HomeDirect DepositHelpContact Us

Hello Alan

Apply for Benefits

Benefit Choices

Primary Benefit

Additional Benefit

Required Documents

11th Grade/ScholarMatch

Acknowledge & Submit

Staff Notes

Your application is complete and ready to be submitted.
Please read the acknowledgement below and check the box to indicate your agreement to the terms.

I, the undersigned, acknowledge:
I am responsible for screening, interviewing, and selecting all care providers.I accept the Local 2/Hospitality Industry Child & Elder Care Plan, my employer, and the Trustees of the SF Culinary, Bartenders and Service Employees Welfare Fund bear no liability for the care arrangement I make.I understand the financial reimbursement I am awarded may be considered taxable income and if so, I will receive a tax Form W-2 at the end of the tax year.I understand falsifying the information provided here, on my financial reimbursement affidavit, or any other Plan forms or documents constitutes fraud and is grounds for termination of all benefits and reimbursement of money improperly paid to me.I agree to all conditions and limitations in the Local 2/Hospitality Industry Child & Elder Care Plan.

☒ I acknowledge and agree to the terms above.

Submit Application

Click the “I acknowledge” checkbox and then click

Submit Application

. After you submit your application, you will be directed back to your Member Page.

Local 2 Hospitality Industry Child & Elder Care Plan

LanguageEnglish

HomeDirect DepositHelpContact Us

Hello Lloyd

Lloyd Christmas - Member Page

Benefit Application

The status of your application for benefits is **Documents Submitted**.
We will review your application shortly and advise you if any additional information is needed.

Benefit	Relative	Status
Informal Child Care	Kim Deal	
College Prep & Counseling	Jack Reacher	

You'll see that the status of your application is now "Documents Submitted." This means that your application is ready for us to review the documents you submitted. If additional information or documents are needed, we will contact you and let you know the current status of your application. If we discover any issues with your application, we will change the status to "Application Incomplete", and we will add a note that explains what you need to do to complete your application.

Local 2 Hospitality Industry Child & Elder Care Plan

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Hello Alan

Alan Parsons - Member Page

Benefit Application

Your application for benefits has been reviewed and the status is **Application Incomplete**.

Please review any notes made by the Local 2 staff, and then click the button below to update your application. After you have addressed the issues raised, you can resubmit your application.

Update Application

Benefit	Relative	Status
Informal Child Care	John Kimball	
Youth Program	Jane Austen	

Note	Date	Entered By
Your birth certificate is invalid.	5/26/2022	Paul Gehrman

If your application is complete, this will be reflected on the Member Page.

Local 2 Hospitality Industry Child & Elder Care Plan

LanguageEnglish

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Hello Lloyd

Lloyd Christmas - Member Page

Benefit Application

Your application for benefits has been reviewed and the status is **Complete**.

Benefit	Relative	Status
Informal Child Care	Kim Deal	
College Prep & Counseling	Jack Reacher	

Direct Deposit

Direct Deposit is the way you receive your benefit payments. Click the [Direct Deposit](#) item on the menu bar. If direct deposit was set up previously for you, then you'll need to verify that information.

Local 2 Hospitality Industry Child & Elder Care Plan

LanguageEnglish

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Hello Ron

Direct Deposit

You have already set up direct deposit. Please check the accuracy of the information below. If it is correct, then you don't need to do anything. If it is incorrect, then you need to set up new direct deposit information.

Account Type :Checking

Bank Routing Number :121042882

Bank Account Number :2575768235

Set Up New Direct Deposit

If this information is incorrect or you haven't used direct deposit in the past, then you'll need to enter your bank account information and upload a voided check or deposit slip.

Direct Deposit

Account Type*

Bank Name*

Bank Routing Number*

Bank Account Number*

Active*

Upload a **voided check** if you want deposits made to your **checking account**.

Upload a **deposit slip** if you want deposits made to your **savings account**.

Uploaded File

[offthegrid.jpg](#)

