

## **OPEN ENROLLMENT NOTICE**

If you would like to switch your medical or dental plan and/or add dependents to your plan, you must complete a new enrollment form and submit it to the Trust Fund Office no later than 1/31/09. All changes will be made effective 3/1/09.

### **Send Enrollment Form To:**

**Hawaii Laborers' Trust Fund Office  
Member Services Department  
1440 Kapiolani Blvd., Suite 800  
Honolulu, HI 96814**



To obtain an Enrollment Form, you may download it from the Hawaii Laborers' website at [www.hilabtrustfunds.com](http://www.hilabtrustfunds.com) or call the Trust Fund Office at (808) 441-8700 or (888) 520-8078 toll free and request for one.