

# **CHILDREN'S WHOLE LIFE**

## **PRODUCT GUIDE**

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**Children's Whole Life** is a whole life product that can begin a lifetime of coverage for children or grandchildren. In addition to the death benefit, the Guaranteed Insurability Rider can help protect the future insurability of the child.

When the policy is in force, the Guaranteed Insurability Rider allows the owner the option of purchasing additional coverage, without evidence of insurability, based on the following life events:

1. Ages 25, 30, 35 and 40
2. Marriage
3. Birth or adoption of a child
4. Home purchase

The face amount of each additional policy may not exceed the face amount of the original policy purchased. A reminder letter will be sent 60 days prior to each of the insured's birthdays at ages 25, 30, 35 and 40.

If your client wishes to purchase additional coverage, please follow these steps:

1. Complete the Guaranteed Insurability Rider form
2. Include the client's Children's Whole Life policy number in the General Information section
3. Cover letter should be attached to the application and include CWL policy number and statement regarding the Guaranteed Insurability Option

The new policy will become effective on the option date. You can exercise this option up to 5 times.

<b>Children's Whole Life*</b>	
<b>Issue Ages</b>	14 days to 17 years
<b>Face Amounts</b>	\$5,000 - \$50,000
<b>Death Benefit</b>	Level Death Benefit
<b>Underwriting Class</b>	Standard
<b>Riders</b>	Guaranteed Insurability Rider Waiver of Premium Due to Death of Owner**
<b>Underwriting</b>	Simplified Underwriting Health questions on application
<b>Unisex Rate Per Thousand</b>	14 days to 4 years: \$3.60 5 – 9 years: \$4.56 10 – 14 years: \$5.40 15 – 17 years: \$7.08
<b>Policy Fee</b>	\$12
*Not available in WA **Not available in MA	



Life insurance underwritten by:

**UNITED OF OMAHA LIFE INSURANCE COMPANY**

A MUTUAL *of* OMAHA COMPANY

3300 Mutual of Omaha Plaza

Omaha, NE 68175

[mutualofomaha.com](http://mutualofomaha.com)

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**WILD KINGDOM**

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Children's Whole Life Policy Form ICC17L154P or state equivalent. In FL, D653LFL17P.