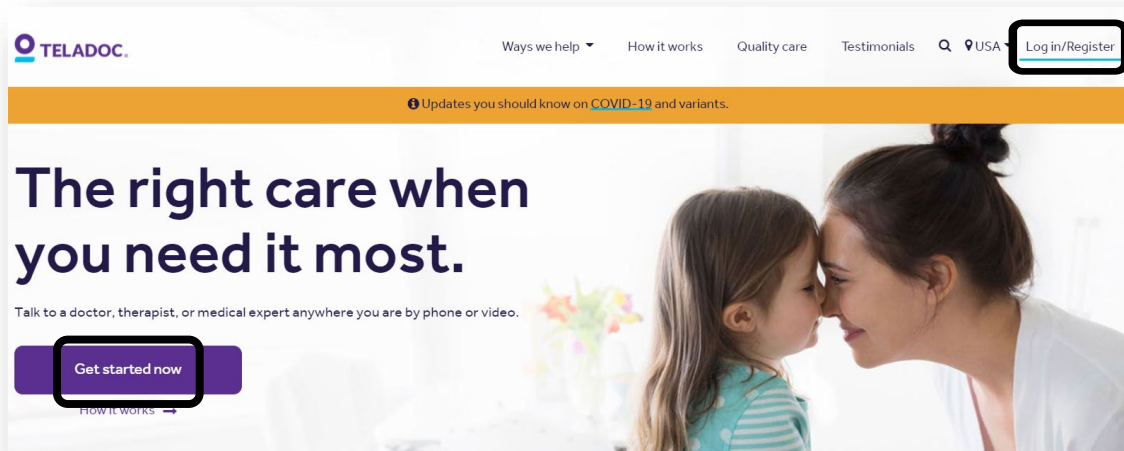


How to Register an Account

Step 1. Uninstall any previous mobile apps on your devices and reinstall using the step-by-step instructions below.

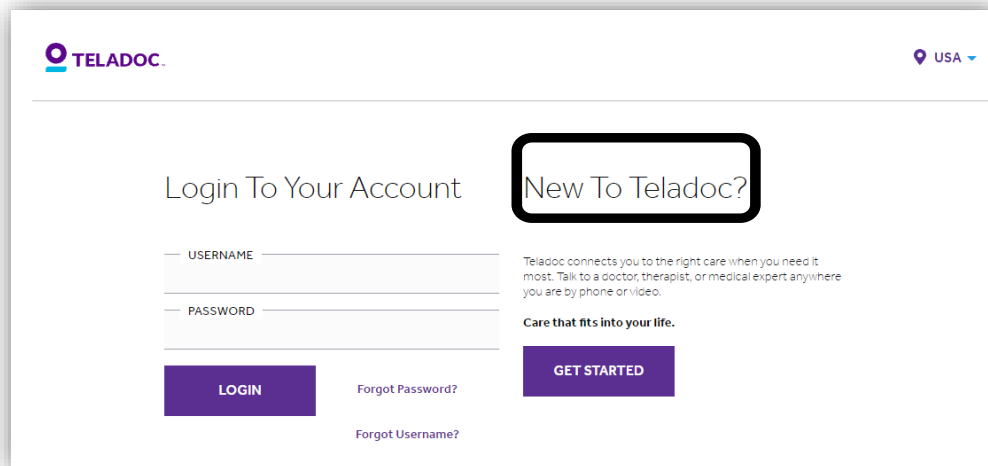
Step 2. Download the Teladoc mobile app  or access www.teladoc.com.

Step 3. Click 'Get Started Now' or 'Log in/Register'.



Users can also register by calling 1-800-TELADOC

Step 4. Click on 'Get Started'.



How to Register an Account

Step 5. Fill in the basic demographic information. (Please use LEGAL first name.)

+ First Name
+ Last Name
+ Date of Birth
+ Zip Code
+ Email
+ Preferred Language
+ Gender

TELADOC CANCEL REGISTRATION X

Confirm Benefits Create Account Get Care

24/7 Access to Care

Let's get started. Enter a few details and we can see if you are covered.
Already have an account? Please [login](#).

*All fields are required unless otherwise noted.

FIRST NAME _____
LAST NAME _____
DATE OF BIRTH (MM/DD/YYYY) _____
COUNTRY: United States Of America ZIP CODE: 11111 or 11111-1111
EMAIL _____
PREFERRED LANGUAGE: English GENDER: _____
 I have a Teladoc Promo Code (Optional)

CONTINUE

Step 6. Select the bubble where the name reflects the benefits provider supplying Teladoc.

TELADOC CANCEL REGISTRATION X

Confirm Benefits Create Account Get Care

Your benefits have been found!

We've matched you to a benefits provider. Please confirm below.

You can also contact us at 1-800-Teladoc (1-800-835-2362) for live assistance.

My benefits provider is Elko County School District
General Medical, General Medical Labs

Continue SELECT ANOTHER PLAN

Step 7. Create a username and password. Answer security questions and your registration is complete!

TELADOC CANCEL REGISTRATION X

Confirm Benefits Create Account Get Care

Finish creating your account

Your benefits are confirmed - we just need a little more information.
*All fields are required unless otherwise noted.

Enter Your Home Address

STREET ADDRESS
12345 New Home

STREET ADDRESS 2 (OPTIONAL)

CITY
Some City

COUNTRY
United States Of America

STATE
Texas

PREFERRED PHONE NUMBER
(555) 555-5555

EMAIL ADDRESS
test@teladoc.com

GENDER
Male

Create Your Username & Password

USERNAME

PASSWORD

CONFIRM PASSWORD

Your password must follow the guidelines below

- 10-20 characters long
- Contain at least one number and at least one letter
- Use only numbers, letters, and standard symbols (standard symbols are limited to !@#%&'*()'@#%&'*())
- Cannot contain the words "pass" or "teladoc" or your username

SECURITY QUESTION 1

SECURITY QUESTION 2

SECURITY QUESTION 3

SECURITY ANSWER 1

SECURITY ANSWER 2

SECURITY ANSWER 3

By clicking "Complete Registration" below, I certify that I have read and understand the [Web and Mobile Privacy Policy](#) and agree to be legally bound by the [Web and Mobile Terms and Conditions](#)

COMPLETE REGISTRATION