

NAMIC MEMBERSHIP

ANNUAL DUES: \$

Dues for membership are based on a company's (or group of companies) annual U.S. Direct Written Premium. NAMIC has two conferences or segments of membership: The Farm Mutual Conference and the Property Casualty Conference. While members are able to access products and services in either conference, each group designs and delivers educational seminars and products and services to meet the needs of their respective segments.

Company Type:	Mutual	Reciprocal	Stock	RRG	Date of Incorporation
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Company _____

Mailing Address _____

City	State/Province	Zip or Postal Code
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Telephone	Fax	Company's Web Address
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President/CEO	E-mail
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Board Chairperson	E-mail
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Government Affairs/Legislative Contact	E-mail
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Reason for joining NAMIC:

Prior Year Direct Written Premium* (indicate group total if applicable) \$ _____

Rating Agency Evaluation: _____ Number of states in which your company does business : _____

Number of states in which your company is licensed: _____ Number of Employees: _____

ORGANIZATION PROFILE

In addition to the information provided on this form, please attach a list of your organization's officers and directors, including e-mail contact information. Also include a copy of your company's mission statement.

*If applicable, list other companies in your group and indicate DWP for each company.

What are your primary lines of business? (Check all that apply)	<input type="checkbox"/> Personal Auto	<input type="checkbox"/> Commercial Auto	<input type="checkbox"/> Credit/A&H
	<input type="checkbox"/> Commercial Casualty	<input type="checkbox"/> Credit/A&H Reinsurance	<input type="checkbox"/> Property
	<input type="checkbox"/> Fidelity & Surety	<input type="checkbox"/> Non-Standard Auto	<input type="checkbox"/> Excess and Surplus
	<input type="checkbox"/> Homeowners	<input type="checkbox"/> Workers' Compensation	<input type="checkbox"/> Other (please list)

Other national or state insurance associations to which your organization belongs (Check all that apply)	<input type="checkbox"/> American Property Casualty Insurance Association (APCIA)	<input type="checkbox"/> Reinsurance Association of America (RAA)	<input type="checkbox"/> Other (please list)
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We hereby apply for membership in the National Association of Mutual Insurance Companies (NAMIC). We certify that the information contained in this application is accurate and truthful. We agree to support the vision, mission, and shared values of the association.

Signature	Title	Date
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