

SPECIAL MARKET MEMBER

Special market members include non-insurance companies involved in one or more aspects of the insurance industry.

ANNUAL DUES: \$

Company

Mailing Address

City

State/Province

Zip or Postal Code

Telephone

Fax

Company's Web Address

President

E-mail

NAMIC Main Contact (if different from above)

E-mail

Has any executive or key employee of your company been convicted of fraud or a felony?

YES

NO

Reason for joining NAMIC:

ORGANIZATION PROFILE

In addition to the information provided on this form, please attach:

1. A list of your organizations executives and managers responsible for services described, including e-mail contact information.
2. Most recent annual report.
3. Third-party rating evaluation (D&B, BBB, industry rating agency)

Please describe the primary services your company provides the insurance industry.

Other national or state insurance associations to which your organization belongs (Check all that apply)

American Property Casualty Insurance Association (APCIA)

Reinsurance Association of America (RAA)

Other (please list)

Other

Signature

Title

Date