

Membership Application – Reinsurance

Reinsurance Member

Dues for membership are based on a company's (or group of companies) annual U.S. Net Written Premium. NAMIC has two segments or types of reinsurance members: Reinsurance Company or Reinsurance Broker. Members are able to access products and services in either type. Reinsurance Brokers are charged an annual fee of \$8,651.

2010-2011 Dues

\$ _____

Company Type: Reinsurance Company Reinsurance Broker Date of Incorporation _____
MM/YYYY

 Company

 Mailing Address

 City State/Province Zip or Postal Code

 Telephone Fax

 Company's Web Address

 President/CEO E-mail

 NAMIC Main Contact (if different from above) E-mail

 Board Chairperson E-mail

 Reason for joining NAMIC

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.

2009 Net Written Premium (U.S.) (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 _____

What are your primary lines of business?

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

- | | |
|----------------------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> American Insurance Association | <input type="checkbox"/> Other National Association(s) |
| <input type="checkbox"/> Property Casualty Insurers of America | _____ |
| <input type="checkbox"/> Reinsurance Association of America | <input type="checkbox"/> Other State/Regional Association(s) |
| _____ | _____ |

We hereby apply for membership in the National Association of Mutual Insurance Companies (NAMIC).

 Signature Title Date