



The Voice of Independent Brokerage Distribution

2018 MEMBERSHIP RENEWAL

RENEW ONLINE! LOG IN TO THE ONLINE STORE AT WWW.NAILBA.ORG TO RENEW

I. MANDATORY AGENCY INFORMATION UPDATE

Required information. Please provide your most current information for the membership directory in NAILBA Network.

I am renewing our agency membership in the following category:

- Regular Member Emeritus

Agency _____

Address _____

City _____

State _____ Zip _____

Phone _____ Fax _____

Web site _____

1. Primary Contact (Voting Member)

Name _____

Title _____

E-mail address _____

If you are applying for Member Emeritus status, skip to signature and payment information sections.

2. Agency Principal/Owner (if not the Primary Contact)

Name _____

Title _____

E-mail address _____

3. Additional Contact

Name _____

Title _____

E-mail address _____

4. Additional Contact

Name _____

Title _____

E-mail address _____

II. NAILBA MEMBERSHIP RENEWAL FORM

You must complete the following questions to certify that your agency still meets all NAILBA qualifications for membership.

1. Does the principal of the agency have the authority to decide where and with whom business is generated and contracted?
 YES NO

2. Are the general agency and all principals and officers in good standing in all of the states and with all of the companies with which it does business?
 YES NO

If not, please provide complete details on a separate sheet of paper.

3. Does the general agency have brokerage general agent's contracts with at least three (3) carriers?
 YES NO

4. Please list all carriers with which the agency has a brokerage general agent's contract:

5. In what year did the agency start business?

6. Does your agency belong to a marketing group(s)?
 YES NO

If YES, which one(s)?

7. Please indicate which products/services the agency provides (*check all that apply*):

- Life (term, UL, VUL, etc.) Health
 Impaired-risk Long Term Care
 Annuities Disability
 Employee Benefit Plans Broker/Dealer

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III. DUES PAYMENT INFORMATION

Regular Member Dues \$1,680

Member Emeritus Dues \$400

Dues are on a *calendar* year basis (January 1 - December 31) and CANNOT be prorated.

Renewals are due on or before January 31. If you renew after February 28, 2018 you will be charged a \$300 late fee.

Check # _____ (made payable to NAILBA)

Credit Card VISA MasterCard American Express

Credit Card Number _____

Exp. Date _____

Name on card _____

Signature _____

IV. SIGNATURE

By signing this application, I attest that the information given here is complete and correct to the best of my knowledge. Further, I authorize NAILBA officers and/or agents to conduct inquiries and to obtain information related to the correctness of this application and the standing of this agency and its principals in the states and with the companies with which this agency does business.

Signature _____

Date _____

Name _____
(PLEASE PRINT)

Title _____

By signing this form you are consenting to receive transactional and information e-mails and faxes from NAILBA.

Membership dues may be tax deductible as ordinary and necessary business expenses. Contributions or gifts to NAILBA are not tax deductible as charitable contributions for Federal income tax purposes.

VOLUNTEER INFORMATION

Are you (or one of your staff) interested in volunteering to participate on a NAILBA committee or task force?

YES, please call me! NO, not at this time

NAILBA CHARITABLE FOUNDATION

Won't you consider renewing your commitment to the Foundation while you're renewing your membership in NAILBA?

Additional amounts made that are intended as contributions to the NAILBA Charitable Foundation may be deductible as a charitable contribution.

Amount you'd like to ADD to your dues as a Foundation contribution:

\$500 \$1,000 \$2,500 \$5,000

Other amount \$ _____

The NAILBA Charitable Foundation and the programs that benefit from your generosity thank you!



National Association of Independent Life Brokerage Agencies

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