



NATIONAL ASSOCIATION OF SURETY BOND PRODUCERS

7735 Old Georgetown Road, Suite 900

Bethesda, MD 20814

Tel: 240.200.1270

Fax: 240.200.1295

www.nasbp.org

NASBP Affiliate Application Checklist

Affiliate Application

Membership Affidavit

Home Office & Branch Office Contacts Form

Affiliate Fees Check

Send application materials to:

National Association of Surety Bond Producers

Membership Department

7735 Old Georgetown Road, Suite 900

Bethesda, MD 20814

Phone: (240) 200-1282 Fax: (240) 200-1295



NATIONAL ASSOCIATION OF SURETY BOND PRODUCERS

7735 Old Georgetown Road, Suite 900

Bethesda, MD 20814

Tel: 240.200.1270

Fax: 240.200.1295

www.nasbp.org

AFFILIATE APPLICATION

Name of Firm: _____

Home Office Location: _____

Address 1: Preferred Mailing Address

Address 2: Preferred Mailing Address

Street _____

Street or PO Box _____

City State Zip _____

City State Zip _____

Telephone: () _____ Fax: () _____ Website: _____

Please check one:

~ 1. Surety Underwriting Company

Indicate one or more states within the United States of America in which admitted to conduct surety business:

~ 2. Managing General Agency (MGA)

Indicate one or more states within the United States of America in which the surety company represented is admitted to conduct surety business: _____

~ 3. Reinsurance Company

Indicate one or more states within the United States of America in which admitted to conduct reinsurance business:

~ 4. Reinsurance Intermediary/Broker

If category 1 or 2 is checked, indicate last calendar year's total written surety bond premiums (contract and commercial) U.S. \$ _____

Please fill in the information below for the individual who will be the key (home office) contact.

Full Name: _____

Title: _____

Professional Designations: _____

Phone No.: _____

Fax No.: _____

E-mail Address: _____

Preferred Salutation: ~ Mr. ~ Mrs. ~ Ms.

Date of Birth: _____ (Optional)

Preferred nickname for meeting badges: _____

Spouse's name for meeting badges: _____

Home Address: _____

City/State/Zip/Country: _____

Home Phone: (Optional) _____

I UNDERSTAND AND AGREE that the National Association of Surety Bond Producers has the right to verify any of the information I have provided in this affiliate membership application, and that the Association may use the information provided in this application to determine my firm's eligibility for affiliate membership in the National Association of Surety Bond Producers

I UNDERSTAND FURTHER that completion of this application for affiliate membership in the National Association of Surety Bond Producers does not imply or assure the acceptance of my firm as an affiliate of the Association. ***I also understand that compliance with the Bylaws, submission of the Membership Affidavit, and remittance of dues are conditions to and of affiliate membership.***

NOTE: SUBMISSION INFORMATION (please return the following documents)

- **Completed signed and dated Application**
- **Completed Home Office & Branch Office Contacts Form**
- **Completed signed and dated Membership Affidavit**
- **Affiliate Fees Check**

_____	_____
Firm Name	Signature of Principal
By: _____	_____
Principal's Name (Print)	Title Date

Please mail your signed application and other materials to:

National Association of Surety Bond Producers
Membership Department
7735 Old Georgetown Road, Suite 900
Bethesda, MD 20814
Phone: (240) 200-1282 Fax: (240) 200-1295

We look forward to serving you as a Member of NASBP.



NATIONAL ASSOCIATION OF SURETY BOND PRODUCERS

7735 Old Georgetown Road, Suite 900

Bethesda, MD 20814

Tel: 240.200.1270

Fax: 240.200.1295

www.nasbp.org

MEMBERSHIP AFFIDAVIT

A principal or officer of each applicant for membership must read, sign and date this affidavit and return it to the NASBP Membership Department along with other completed application materials.

I HEREBY AFFIRM THAT:

- (a) I am an officer or principal of my firm and I possess the authority to make this Affidavit; and
- (b) No current officer, owner, partner, manager, director or managing director of the firm has been charged with and duly convicted of a felony involving theft, conversion or fraud, including consumer, wire or mail fraud, in the performance of surety business or other business endeavors.

Firm Name: _____

Signature: _____ Date: _____

Print Name/Title: _____

Please mail your signed materials to:

National Association of Surety Bond Producers

Membership Department

7735 Old Georgetown Road, Suite 900

Bethesda, MD 20814

Phone: (240) 200-1282 Fax: (240) 200-1295

We look forward to serving you as a Member of NASBP.

AFFILIATE FEES PRICE STRUCTURE
THIS IS NOT AN INVOICE

AFFILIATE FEES PRICE STRUCTURE (Domestic)

	FEES
Surety Companies with 20__ total written surety premiums greater than \$100 million	\$10,000
Surety Companies with 20__ total written surety premiums of \$20 million to \$100 million	\$8,000
Surety Companies with 20__ total written surety premiums less than \$20 million	\$5,000
Reinsurers/Reinsurer Intermediaries/MGAs	\$5,000

AFFILIATE FEES PRICE STRUCTURE (International)

	FEES
International Surety Companies with 20__ total written surety premiums greater than \$100 million	\$5,000
International Surety Companies with 20__ total written surety premiums of \$20 million to \$100 million	\$4,000
International Surety Companies with 20__ total written surety premiums less than \$20 million	\$2,500

Member dues and affiliate fees paid to NASBP may be deductible as an ordinary and necessary business expense. However, they are not deductible as a charitable contribution. Please consult your tax advisor for more specific information or assistance. Under the Omnibus Budget Reconciliation Act of 1993, that portion of membership dues and fees used for lobbying is not deductible. It is estimated that ___% of membership dues and affiliate fees will be used to fund NASBP's lobbying activities in 20__.