

BIG I | CONNECTICUT

MEMBERSHIP APPLICATION

MEMBERSHIP

As defined by our Constitution and By-Laws
Article IV, Section 1

The Membership of this Association shall be composed of independent agencies who have the legal ability to represent more than one company, properly licensed to do property, casualty and surety business in Connecticut, who shall pay an annual fee as prescribed, who shall subscribe to the Object of this Association and the Declaration of Principles as set forth herein, and who shall be members, at their option, of the local association of insurance agents having jurisdiction in their respective home towns or cities if there be any.

MEMBERSHIP APPLICATION

Name of Principal Contact for mailings and association information: _____

Agency: _____

Street Address: _____ P.O. Box: _____

City & Zip: _____ Website: _____

Phone: _____ Fax: _____ E-Mail: _____

Total number of office employees (include producers, managers, CSRs, administrative, etc.): _____

Of total number of employees, how many are licensed: Property/Casualty only _____

Life/Health only _____

Both P/C and L/H _____

Number of producers within agency: * _____

Bulletins are delivered via e-mail. Please list any additional staff to receive Bulletins, etc. and e-mail addresses:

_____ E-mail: _____

_____ E-mail: _____

_____ E-mail: _____

_____ E-mail: _____

_____ E-mail: _____

List of all companies, except Life, represented by your agency:

Please list any questions or concerns that you would like Big I Connecticut to address.

Additional locations (If necessary, please complete and attach additional pages):

Agency: _____

Street Address: _____

P.O. Box: _____ City & Zip: _____

Phone: _____ Fax: _____ E-Mail: _____

List other insurance associations that agency is a member of: _____

As an added benefit, your Big I Connecticut membership includes membership in Trusted Choice®, the national independent insurance agents' brand. After receipt of your signed application you will receive welcome correspondence from IIABA regarding Trusted Choice® and its benefits. You may visit the Trusted Choice® web site at www.trustedchoice.com/licenseagreement. Please be sure to review the Trusted Choice® License Agreement and Pledge of Performance which is posted on the website.

DUES SCHEDULE

(Dues Year is September 1 to August 31)

* Annual dues are based on number of producers in an agency. A producer is defined as a licensed full-time property/casualty salesperson. This does not include CSRs.

1 Producer Agency - \$ 710.00	6 Producer Agency - \$3,925.00
2 Producer Agency - \$1,365.00	7 Producer Agency - \$4,550.00
3 Producer Agency - \$2,030.00	8 Producer Agency - \$5,200.00
4 Producer Agency - \$2,710.00	9 Producer Agency - \$5,820.00
5 Producer Agency - \$3,390.00	10+ Producer Agency - \$6,430.00

I hereby make application for membership in the Big I Connecticut. By submitting payment of membership dues and signing this application, I will abide by its Constitution and ByLaws, and support its objectives and have accepted the terms of the "Trusted Choice® License Agreement."

You may choose to not participate in the Trusted Choice® Program and not be bound by the terms by opting out: ____ Opt Out. No license is then granted to use the trademark or participate in the Trusted Choice® Program.

Signature: _____ Date: _____

Please Print Name of Person Signing: _____

Mail Application and Dues Payment to:
Big I Connecticut
30 Jordan Lane
Wethersfield, CT 06109