



## Associate Membership Application

Additional information: [www.moagent.org](http://www.moagent.org). Contact MAIA with questions: 573-893-4301, or email [membership@moagent.org](mailto:membership@moagent.org).

### Organization Information

Associate membership is available to organizations engaged in a profession or business related to the American Agency System, but in a capacity other than an insurance agency or wholesaler located in Missouri.

Organization Name \_\_\_\_\_

Main Contact \_\_\_\_\_ Phone \_\_\_\_\_ Website \_\_\_\_\_

Main Location Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Mail Zip \_\_\_\_\_

Main Location Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Street Zip \_\_\_\_\_

We are: ☐ Insurance Co. ☐ Wholesaler (with no Mo. locations) ☐ Vendor ☐ Other: \_\_\_\_\_

Is your organization an LLC? ☐ Y ☐ N If yes, do you file taxes as an S-Corp or C-Corp? ☐ Y ☐ N

If your LLC does not file as an S-Corp or C-Corp, have you registered with the Missouri Ethics Commission? ☐ Y ☐ N

### Associate Contacts

The three individuals named below will receive MAIA's mailings, electronic newsletter and a copy of the Missouri Agent magazine.

1. Name/Designations \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Mail Zip \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Street Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

2. Name/Designations \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Mail Zip \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Street Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

3. Name/Designations \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Mail Zip \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Street Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

### Associate Membership Dues

This membership allows the named organization and its personnel to participate in all association activities, programs and services at member rates and to receive all MAIA mailings.

Associate Membership Dues	\$ 600
MAPAC Contribution* (Suggested amount \$100)	\$
TOTAL ENCLOSED	\$

**Membership Conditions:** Membership is from Jan. 1 to Dec. 31. All dues are fully earned at time of payment. MAIA dues are not deductible as a charitable contribution for income tax purposes; however, 77.7% of your dues for 2025 may be deductible as a business expense.

**\*MAPAC:** All members are urged to voluntarily contribute to the Missouri Agents Political Action Committee; contributions are not deductible as charitable contributions for income tax purposes. Effective Aug. 28, 2022, LLCs that have not elected to be classified as a corporation under the federal tax code must register with the Missouri Ethics Commission prior to making a contribution to MAPAC. To register, go to <https://mec.mo.gov/LLC/Registration>. If you make a contribution but have not registered, or we cannot determine if you need to register, we will return your contribution within 10 business days of receipt.

### Payment Information & Membership Terms

Payment Type: ☐ Check Enclosed (payable to MAIA) or ☐ Visa ☐ MC ☐ AmEx ☐ Discover

Card No. \_\_\_\_\_ Verification Code \_\_\_\_\_ Ex. Date \_\_\_\_\_

Signature \_\_\_\_\_ Billing Address \_\_\_\_\_

This application is hereby tendered for associate membership in the Missouri Association of Insurance Agents, and it is understood not to include membership in the Independent Insurance Agents and Brokers of America, nor the National Association of Professional Insurance Agents. It is further understood that no logo of the IABA, nor the PIA National may be used by the named applicant without permission of the respective national association.

Name (Printed): \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**Submit with payment to:**

MAIA, 3315 Emerald Lane, Jefferson City, Mo. 65109, or Fax: 573-893-3708, or Email: [membership@moagent.org](mailto:membership@moagent.org)