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# **Agency Membership Application**

Additional information: www.moagent.org

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SM	Contact MAIA with questions: 573-893-4301, or	email membersnip@moagent.or								
Agency Information - Main Location										
Legal Agency Name (Location #1)	Retail Agend	cy MGA/E&S Agency with Mo. Location								
DBA	Main Contact									
Phone	Website									
Mailing Address	City	State Mail Zip								
Street Address	City	State Street Zip								
Total staff count (including owners and branch e	employees)* County									
E&O Carrier	E&O Ex. Date									
Is your organization an LLC? $\Box$ Y $\Box$ N If yes,	, do you file taxes as an S-Corp or C-Corp? $\ \square\ \ Y \ \square\ N$									
If your LLC does not file as an S-Corp or C-Corp,	have you registered with the Missouri Ethics Commission?	Y DN								
Branch Location(s)										
• • • • • • • • • • • • • • • • • • • •	to be found on the agency locator at trustedchoice.com, branches m	ust be listed and paid for.								
Legal Agency Name (Location #2 - If different th	nan main location)									
DBA										
	 City	State Mail 7in								
_	City	·								
	PhoneCou									
Dues Schedule	. Hone									
Dues schedule										
Count         Dues         Members         Count         Dues         Members           1         \$450         1         28         \$1,530         12           2         \$490         2         29         \$1,570         12           3         \$530         2         30         \$1,610         12           4         \$570         2         31         \$1,650         12           5         \$610         3         32         \$1,690         12           6         \$650         3         33         \$1,730         12           7         \$690         3         34         \$1,770         12           8         \$730         3         35         \$1,810         12           9         \$770         4         36         \$1,850         12           10         \$810         4         37         \$1,890         12           11         \$850         4         38         \$1,930         12           12         \$890         4         39         \$1,970         12           13         \$930         5         40         \$2,010         12           1	producers or brokers (whether issued W-2 or 1099 for unlicensed support staff in all agency locations, regard Independent producers must be counted unless they may part-time employees count as one full-time employee.  **MAPAC: All members are urged to voluntarily contributions or gifts to a political charitable contributions for income tax purposes. Effect elected to be classified as a corporation under the federate Ethics Commission prior to making a contribution to MAI LLC/Registration. If you make a contribution but have not need to register, we will return your contribution within 1  Total Dues Calculation  MAIA maintains affiliations with both the Independent of America (IIABA) and the National Assacy Agents (PIA). Base dues include membership in	producers or brokers (whether issued W-2 or 1099 forms), CSRs and any other licensed and unlicensed support staff in all agency locations, regardless if the additional locations are listed. Independent producers must be counted unless they maintain a separate MAIA membership. Two part-time employees count as one full-time employee.  **MAPAC: All members are urged to voluntarily contribute to the Missouri Agents Political Action Committee. MAPAC contributions or gifts to a political action committee 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.  Total Dues Calculation  MAIA maintains affiliations with both the Independent Insurance Agents and Brokers of America (IIABA) and the National Association of Professional Insurance Agents (PIA). Base dues include membership in MAIA, IIABA and Trusted Choice. Members may elect to belong to PIA for an additional fee.  Base Membership Dues (from chart to left)  Additional Locations (x \$50 each) \$  MAPAC Contribution**  \$100  PIA Membership (Add \$232)								
•										
Payment Type: □ Check Enclosed (payable to MAIA) or □ Visa □ MC □ AmEx □ Discover										

\_Billing Zip Code \_

Verification Code \_\_\_\_\_Ex. Date

#### Staff Member Info.

Please provide the requested detail for each member of your agency and all branch offices. MAIA will set up each individual with a user ID and password so they may have access to the members-only sections of the MAIA website (moagent.org) and the IIABA website and the resources available, including the Virtual University resource center.

<u>Voting Members:</u> Please check the box for the individuals from the agency who are to be voting members of MAIA. Voting members must be licensed producers. The number of voting members checked below may not exceed the maximum voting members listed in the chart on the previous page. These individuals will also receive all association mailings.

Voting <u>Membe</u>	Note: MAIA does not sell or publish e-mail addresses.						
П	Name/Designations:						
	E-Mail:	_ Title_	DOB:	Location # :	_□Part-Time		
	Name/Designations:		Primary Role: 🗆 Principal 🗆 Agency Mg	r. 🗆 Producer 🗆 Acct. Mgr.	□CSR□IT		
	E-Mail:	_ Title_	DOB:	Location # :	_□Part-Time		
	Name/Designations:		Primary Role: ☐ Principal ☐ Agency Mg	r. 🗆 Producer 🗆 Acct. Mgr.	□CSR□IT		
	E-Mail:	_ Title_	DOB:	Location # :	_□Part-Time		
	Name/Designations:		Primary Role: ☐ Principal ☐ Agency Mg	r. 🗆 Producer 🗆 Acct. Mgr.	□CSR□IT		
	E-Mail:	_ Title_	DOB:	Location # :	_ 🗆 Part-Time		
	Name/Designations:		Primary Role: ☐ Principal ☐ Agency Mg	r. □ Producer □ Acct. Mgr.	□CSR□IT		
	E-Mail:	_ Title_	DOB:	Location # :	_ 🗆 Part-Time		
	Name/Designations:		Primary Role: ☐ Principal ☐ Agency Mg	r. □ Producer □ Acct. Mgr.	□CSR□IT		
Ш	E-Mail:	_ Title_	DOB:	Location # :	_ 🗆 Part-Time		
	Name/Designations:		Primary Role: 🗆 Principal 🗆 Agency Mg	r. 🗆 Producer 🗆 Acct. Mgr.	□CSR□IT		
	E-Mail:	_ Title_	DOB:	Location # :	_ 🗆 Part-Time		
	Name/Designations:		Primary Role: ☐ Principal ☐ Agency Mg	r. □ Producer □ Acct. Mgr.	□CSR□IT		
	E-Mail:	_ Title_	DOB:	Location # :	_□Part-Time		
	Name/Designations:		Primary Role: 🗆 Principal 🗆 Agency Mg	r. 🗆 Producer 🗆 Acct. Mgr.	□CSR□IT		
	E-Mail:	_ Title_	DOB:	Location # :	_□Part-Time		
	Name/Designations:		Primary Role: 🗆 Principal 🗆 Agency Mg	r. □ Producer □ Acct. Mgr.	□CSR□IT		
	E-Mail:	_ Title_	DOB:	Location # :	_□Part-Time		
Me	mbership Term & Conditions		<b>Publications and Mailings</b>				
Membership runs from the month joined to the same month the following year. 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.  Would others in your agency like to receive our publications and mailings? Additional subscriptions are available to members for the following publications: Missouri Agent magazine, Agents NewsLine electronic newsletter and the Education Bulletin. Contact us for more information or visit www.moagent.org under the Membership, Publications & Info tab.							
Me	embership Eligibility Verification						
I hereby certify that the information contained in this application is true and correct, that the agency named herein is properly licensed by the Missouri DCI and operates within the American Agency System. Also, I agree that I have read the Trusted Choice <sup>®</sup> License Agreement (accessible at trustedchoice.com/licenseagreement) and the Pledge of Performance (trustedchoice.com/pledgeofperformance) and agree to the terms.							
No	ame (Printed): Ti	tle: _	C	)ate:			
Si	gnature:						



## **Agency Membership**

### **Employee and Branch Additional Listing**

Contact MAIA with questions: 573-893-4301, or email membership@moagent.org.

#### Staff Member Info. - in addition to those listed on main application

Voting <u>Membe</u>							
	Name/Designations:						
	Name/Designations:		_ Primary Role: ☐ Principal ☐ Ager	ncy Mgr.□ Prod	ucer□Acct. Mgr. l	□CSR□IT	
	E-Mail:	_ Title	DC	OB:	Location # :	_ □ Part-Time	
	Name/Designations:		, , ,	, ,			
	E-Mail:	_ Title	D(	OB:	Location #:	_□Part-Time	
	Name/Designations:E-Mail:		,		_		
	Name/Designations:		Primary Role: ☐ Principal ☐ Age	ncy Mgr. 🗆 Prod	lucer 🗆 Acct. Mgr. I	□CSR□IT	
	E-Mail:	_ Title	D(	OB:	Location # :	_□Part-Time	
П	Name/Designations:					□CSR□IT	
	E-Mail:	_ Title	D(	OB:	Location # :	_□Part-Time	
	Name/Designations:		Primary Role: ☐ Principal ☐ Age	ncy Mgr. 🗆 Prod	lucer 🗆 Acct. Mgr. l	□CSR□IT	
	E-Mail:	_ Title	D(	OB:	Location # :	_□ Part-Time	
	Name/Designations:		Primary Role: ☐ Principal ☐ Ager	ncy Mgr. 🗌 Prod	lucer 🗆 Acct. Mgr. l	□CSR□IT	
	E-Mail:	_ Title	D0	OB:	Location # :	_□Part-Time	
	Name/Designations:		Primary Role: ☐ Principal ☐ Ager	ncy Mgr. 🗆 Prod	lucer 🗆 Acct. Mgr.	□CSR□IT	
	E-Mail:	_ Title	D(	OB:	Location #:	_□Part-Time	
	Name/Designations:		Primary Role: ☐ Principal ☐ Age	ncy Mgr. 🗆 Prod	lucer 🗆 Acct. Mgr. l	□CSR□IT	
	E-Mail:	_ Title	D(	OB:	Location # :	_□Part-Time	
	Name/Designations:		Primary Role: ☐ Principal ☐ Ager	ncy Mgr. 🗌 Prod	lucer 🗆 Acct. Mgr. l	□CSR□IT	
	E-Mail:	_ Title	D0	OB:	Location # :	_□Part-Time	
Rr	anch Location(s) - in addition to those listed on ma	in annli	cation				
	ere is a \$50 charge per branch location listed. In order to be found on the agenc	• • •		ust be listed ar	nd paid for.		
L	egal Agency Name (Location #3 - If different than main location)						
D	DBA Mo	iling Addre	2SS				
С	ity	State		Mail Zip			
	treet Address	•			·		
Main Contact for this LocationPhoneCounty							
Legal Agency Name (Location #4 - If different than main location)							
	DBA Mo 	J					
	treet Address						
			Cou				