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 Email: info@piamn.com



PIA Membership Application

Agency (PIA1) _____

Licensee _____ Designation(s) _____ Email _____

Licensee _____ Designation(s) _____ Email _____

Street Address _____

City _____ State _____ Zip _____

Telephone (_____) _____ Fax (_____) _____

E&O Carrier _____ Expiration Date _____ / _____ / _____

Sponsor _____ Send my weekly Agent Focus newsletter via: Email _____ Fax _____

Please contact me regarding **participation** on the following PIA of Minnesota committees:

1) Membership/Benefits & Services _____ 2) Education _____ 3) Regulatory Affairs/Company Relations _____

Additional Agency Locations (\$50 each—includes one licensed employee)

Agency (PIA2) _____ Name _____ Designation(s) _____

Address _____ City _____ State _____ Zip _____

Agency (PIA3) _____ Name _____ Designation(s) _____

Address _____ City _____ State _____ Zip _____

Additional Licensees (\$25 each) Please note the location for each additional licensee:

PIA1 PIA2 PIA3

Name _____ Designation(s) _____ Email _____

Name _____ Designation(s) _____ Email _____

Name _____ Designation(s) _____ Email _____

Name _____ Designation(s) _____ Email _____

Membership Classifications

Active Member are persons actively engaged as a principal/licensee in the independent insurance agency or brokerage business. For the membership fee of \$370 all employees of member's agency are eligible for benefits and services.

At no additional cost, the agency can list another licensed principal/licensed employee from the same agency location. Additional licensed agency employees may be listed for \$25 each.

Additional agency locations can be listed for \$50 per location this includes one licensees at that location. Additional licensees at each location may be listed for \$25 each.

All active members have full voting rights.

PIA dues are not deductible as charitable contributions for income tax purposes. However, 82.5% of your dues may be deductible as a business expense.
 FEIN#: 03-0477063

Annual Dues - Make check payable to: PIA of Minnesota

Agency Membership	\$370	=	_____
Includes one additional licensee			
Add'l Agents/same location	\$25 each (x)	=	_____
Additional Location(s)	\$50 each (x)	=	_____
Includes one licensee			
Add'l Agents @ Add'l Locations	\$25 each (x)	=	_____
Retired Agent	\$25	=	_____
Total		=	_____

Name (print) _____

Signature _____

Date _____