

NEW     RENEWAL 2008-2009

**AUSTIN ASSOCIATION OF INSURANCE PROFESSIONALS  
MEMBERSHIP APPLICATION  
P.O. BOX 2723  
AUSTIN, TX 78767  
DUES AMOUNT: \$50.00**

NAME: \_\_\_\_\_ DESIGNATIONS: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

PREFERRED MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

**MEMBER PROFILE**

1. NUMBER OF YEARS EMPLOYED IN THE INSURANCE INDUSTRY: \_\_\_\_\_

2. JOB DESCRIPTION: \_\_\_\_\_

3. EMPLOYER (CHECK THE ONE THAT CLOSELY APPLIES):

- |  |  |                                       |                                     |
|--|--|---------------------------------------|-------------------------------------|
| <input type="checkbox"/> CSR/SVCS        | <input type="checkbox"/> ADJUSTER        | <input type="checkbox"/> UNDERWRITING | <input type="checkbox"/> PRODUCER   |
| <input type="checkbox"/> CLAIMS          | <input type="checkbox"/> CLERICAL        | <input type="checkbox"/> AGENCY OWNER | <input type="checkbox"/> ACCOUNTING |
| <input type="checkbox"/> PREMIUM FINANCE | <input type="checkbox"/> RISK MANAGEMENT | <input type="checkbox"/> MARKETING    |                                     |
| <input type="checkbox"/> OTHER:          |  |                                       |                                     |

4. TYPE OF BUSINESS (CHECK ALL):

- P/C     LIFE     ACCIDENT/HEALTH     FINANCE     OTHER \_\_\_\_\_

5. TYPE OF LICENSE (CHECK ALL):

- LRA     GROUP I     ISR     RISK MANAGER     GROUP II     ADJUSTER     SOLICITOR

6. PROFESSIONAL DESIGNATIONS (CHECK ALL):

- PIWT     ACSR     CISR     CIC     CPCU     ARM     AAI     AU     OTHER: \_\_\_\_\_

7. YEAR JOINING IWA: \_\_\_\_\_

8. CONSENT TO FAX/EMAIL: \_\_\_\_\_ YES OR \_\_\_\_\_ NO

**PLEASE CALL SHIELA MOORE AT 512-343-000 x140 IF YOU HAVE ANY QUESTIONS OR NEED ANY FURTHER INFORMATION. PLEASE MAKE COPIES OF THIS FORM FOR OTHER PEOPLE THAT WOULD LIKE TO JOIN.**

**THANK YOU FOR YOUR SUPPORT AND WELCOME ABOARD!**