

NATIONAL INSURANCE “NIME” MARKETING EXECUTIVES

Application to National Insurance Marketing Executives (NIME)

PLEASE CHECK ONE:

- 1) ___ I AM A CURRENT MEMBER RENEWING MEMBERSHIP
2) ___ I AM A NEW MEMBER REFERRED BY: _____

Information on this application will be used to update our membership roster. Please fill in completely, including professional designations if applicable. Please forward any change in address or company affiliation to the Executive Director as soon as possible.

Date: _____

Name _____ Nickname _____

Title _____ Designations _____

Company Name _____

Company Address _____

Business Phone _____ Fax _____

Home Address _____

Home Phone _____ Email _____

Spouse Name _____

Statement Regarding Membership (check one)

___ **REGULAR MEMBER:** individuals who are marketing executives in the insurance industry and whose responsibilities include, but are not limited to, the overall marketing activities of their companies.

___ **ASSOCIATE MEMBER:** Associate membership in this ASSOCIATION shall be composed of persons who support the insurance industry

As a NIME member, you may desire to assist the organization with an additional sponsorship contribution:

Legacy Contribution \$100

Return Application with \$200.00 annual dues payable to NIME

Lynette Owens, Executive Director
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