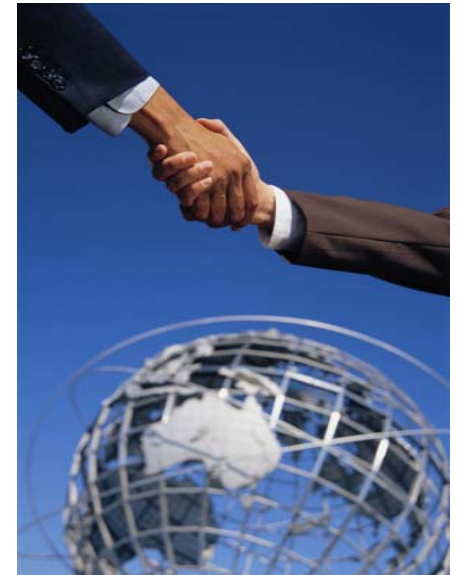




*Independent Insurance Agents and Brokers
of Orange County*

2012 Membership Application



Independent Insurance Agents and Brokers of Orange County
1442 E. Lincoln Ave., PMB 441 • Orange, CA 92865-1934
www.iiaboc.com

IIABOC Mission Statement

To provide educational, networking, legislative and resource support dedicated to enhancing the prosperity of our members and partners while serving the community at large.

Who We Are

Formed in 1947 the Independent Insurance Agents and Brokers of Orange County have a history of leadership in the local insurance community.

Membership continues to offer continuing education of the highest quality, political advocacy for the benefit of our clients in support of the local agency system and an associate member program allowing the association to support services, activities and products vital to our business life.

Education Day, Continuing Education, the Annual Golf Tournament and our Holiday Social highlight our activity calendar we invite your support, become an active member.



2012 Local Membership Application (New / Renewal)

Agency Name: _____

Address: _____

City/State/Zip: _____

Contact: _____ Title: _____

Phone: _____ / _____ Fax: _____ / _____

Email: _____

Agency Employees: _____ Title: _____ Email: _____

_____ Title: _____ Email: _____

List additional employees and their email addresses on a separate piece of paper.

- Number of Employees: 1 to 5 Dues: \$250.00
- Number of Employees: 6 to 10 Dues: \$375.00
- Number of Employees: 11 or more Dues: \$500.00

**MEMBERSHIP IS BASED ON A CALENDAR YEAR: JAN. 1 THROUGH DEC. 31.
MID-YEAR PRO-RATA IS AVAILABLE. CONTACT THE IIABOC OFFICE FOR INFORMATION.**

Make checks payable to:

IIAB of Orange County and mail to 1442 E. Lincoln Ave., PMB 441, Orange, CA 92865 or by:

Credit Card: American Express Discover MasterCard Visa

Amount to be Billed: \$ _____ Expiration Date: ____ / ____

Card Number: _____

Name on Card: _____

Billing Address: _____

City, State, Zip: _____

Signature: _____

Questions? Contact: Gail James Clarke · Ph: 866.921.6440 · Fax: 866.921.6443
Email: gjmgt@yahoo.com

THANK YOU FOR YOUR MEMBERSHIP!