



*Minnesota Association of Farm  
Mutual Insurance Companies*

601 Elm Street East  
P.O. Box 880  
St. Joseph, Minnesota 56374  
Phone: (320) 271-0909  
Fax: (320) 271-0912  
www.mafmic.org

### Affiliate Membership Application

- Affiliate members are mutual insurance companies other than township mutuals or statewide companies that package with township mutuals.
- Affiliate membership is not available to companies that qualify for *Regular* or *Associate* membership.
- Affiliate members are provided all advantages of membership with the exception of holding office and voting.
- Affiliate members currently pay membership dues of \$2,300 per year (2008-2009).
- MAFMIC dues are not deductible as charitable contributions for income tax purposes. However, 88% of your dues may be deductible as a business expense.

Date of Incorporation (MM/YYYY) \_\_\_\_\_

\_\_\_\_\_  
Company

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Company's Web Address

\_\_\_\_\_  
President/CEO

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
MAFMIC Main Contact (if different from above)

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Board Chairman

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Reason for joining MAFMIC

What are your primary lines of business? (Check all that apply)

Personal Auto

Commercial Casualty

Fidelity & Surety

Homeowners

Commercial Auto

Credit/A&H Reinsurance

Non-Standard Auto

Workers' Compensation

Credit/A&H

Property

Excess and Surplus

Other (please list)  
\_\_\_\_\_

Other state and/or national insurance associations to which your organization belongs:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Return completed form to:**  
MAFMIC  
601 Elm Street East  
PO Box 880  
Saint Joseph, MN 56374

We hereby apply for membership in the Minnesota Association Farmers Mutual Insurance Companies (MAFMIC)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date