



NATIONAL ASSOCIATION OF SURETY BOND PRODUCERS

7735 Old Georgetown Road, Suite 900

Bethesda, MD 20814

Tel: 240.200.1270

Fax: 240.200.1295

www.nasbp.org

NASBP
Retired Surety Professional
Application Checklist

Retired Surety Professional Application

Master File Questionnaire

Member Dues Check

Send application materials to:

National Association of Surety Bond Producers
Membership Department

7735 Old Georgetown Road, Suite 900

Bethesda, MD 20814

Phone: (240) 200-1282 Fax: (240) 200-1295



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RETIRED SURETY PROFESSIONAL APPLICATION

Name: _____

Address 1: Preferred Mailing Address

Address 2: Home Address

Street

Street or PO Box

City State Zip

City State Zip

Telephone: () Fax: () Email: _____

1. Please list the member or affiliate firm from which you retired:

2. Please list the year of retirement: _____

3. Did you engage in the production of surety as a producer and/or underwriter for 15 or more years before retirement?

I so affirm: Yes: ___ No: ___

4. Please affirm that you no longer engage or intend to engage in the production of surety as a producer or underwriter.

I so affirm: Yes: ___ NO: ___

5. Please indicate interest areas or activities, if any, in which you wish to engage as a Retired Surety Professional member of NASBP:

I UNDERSTAND AND AGREE that the National Association of Surety Bond Producers has the right to verify any of the information I have provided in this application, and that the Association may use the information provided in this application to determine my eligibility for membership as a Retired Surety Professional in the National Association of Surety Bond Producers.

I UNDERSTAND FURTHER that completion of this application for membership in the National Association of Surety Bond Producers does not imply or assure the acceptance as a Retired Surety Professional member of the Association. *I also understand that completion of this application with full information meeting all criteria, and remittance of dues are conditions of membership.*

NOTE: SUBMISSION INFORMATION (please return the following documents)

- Completed, signed, and dated Membership Application
- Completed Master File Questionnaire
- Member Dues Check

Signature

Name (Print)

Date



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**NASBP INDIVIDUAL
MASTERFILE QUESTIONNAIRE**

Full Name: _____

Former Title: _____

Professional Designation: _____

E-mail Address: _____

Salutation: **Mr.** **Mrs.** **Ms.**

Date of Birth: ____ / ____ / ____
(Optional)

Add your name to NASBP mailing lists? **YES** **NO**

Add your name to NASBP emailing lists? **YES** **NO**

Preferred nickname for NASBP meeting badges: _____

Spouse's name for NASBP meeting badges: _____

Home Address: _____

Home Phone: _____

Please mail your signed application and other materials to:

National Association of Surety Bond Producers

Membership Department

7735 Old Georgetown Rd, Suite 900

Bethesda, MD 20814

Phone: (240) 200-1270 Fax: (240) 6200-1295

We look forward to serving you as a valued contributor of the NASBP Community.



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**RETIRED SURETY PROFESSIONAL DUES PRICE STRUCTURE
THIS IS NOT AN INVOICE**

NASBP retired surety professional membership dues are set by the Board of Directors. NASBP bylaws stipulate that Retired Surety Professionals shall pay an annual membership investment to the Association based on the following schedule:

RETIRED SURETY PROFESSIONAL PRICE STRUCTURE

	20__ DUES
Retired Surety Professional	\$515

Retired Surety Professional dues paid to NASBP may be deductible as an ordinary and necessary business expense. However, they are not deductible as a charitable contribution. Please consult your tax advisor for more specific information or assistance. Under the Omnibus Budget Reconciliation Act of 1993, that portion of membership dues and fees used for lobbying is not deductible. It is estimated that ___% of membership dues and affiliate fees will be used to fund NASBP's lobbying activities in 20__.