



**MEMBERSHIP APPLICATION
SOUTHEASTERN CLAIM EXECUTIVES ASSOCIATION**

SECTION I For Company whose Home Office or Executive Office is located in one of the Southeastern States:

- a) We, _____, a duly chartered property and/or casualty insurance company in the State of _____, hereby apply for a membership in SCEA for the following claims executive whose area of responsibility includes jurisdiction over our claims operation in the Southeastern States.

Name _____ Title _____

Street or P.O. Box _____

City _____ State _____ ZIP _____

Phone _____ Email _____

Background: _____

Enclose \$100.00 Initiation Fee (2009).
Annual Dues \$200 year (2009)

(s) Applicant (Individual Representative)

To apply for membership, print and complete this form, enclose payment, and mail to:

Mike Meyer, Treasurer
Southeastern Claims Executives Association
C/O North Carolina Farm Bureau Mutual Co, Inc.
P.O. Box 27427
Raleigh, NC 27613

Mike.Meyer@NCFBINS.com
919-783-4387