

SHORT-TERM MEMBER INSURANCE REGISTRATION

(Use this form only if you are adding insurance to an existing membership)

Yes, I want Educators Professional Liability Insurance

Insured Information:

Name _____ Title _____
 District _____ Address _____
 City _____, Texas Zip _____ - _____ Phone _____
 E-Mail _____

Payment Information:

Check, made payable to TASBO for \$50.00 **Credit Card:** Mastercard Visa AMEX

Name on card: _____

Card Number: _____ Expiration Date: _____

Signature: _____

I understand that the policy term will go into effect the date that TASBO receives and processes this completed, signed form, and upon receipt of payment for the insurance premium and will remain in effect during the period of my current membership. Additional information about the insurance program is available at www.tasbo.org/become-a-member/member-benefits. I confirm that I have read the information related to coverage and certify that I meet the eligibility requirements for this coverage.

Signature _____ Date _____

Mail form with check and payment to:

Mail form with check to TASBO, 5920 W William Cannon Dr, Bldg 1 Ste 200, Austin, TX 78749 or call with credit card information 512.462.1711 Please submit credit payment online or fax at 512.462.1782. Do not mail credit card information.

Endorsed By:

Texas Association of School Business Officials |

5920 W William Cannon Dr, Bldg 1 Ste 200, Austin, Texas 78749 512.462.1711

Offered By:

The John A. Barclay Agency, Inc. | 8701 Shoal Creek Blvd, Bldg 2, Ste 201 Austin, TX 78757 512.374.4927

Managing General Agent: RT ProExec Carrier Rated A+XV Superior by AM Best

Itemization of Insurance Fee: Of the \$50.00 total fee for professional liability insurance, the insurance premium is \$37.00, state taxes and fees of 4.925% are \$1.82, and \$11.18 is retained as a TASBO administrative fee.