



The South Louisiana Chapter Risk Insurance Management Society Membership Application

Please Print or Type

Please check one:

New Membership: []

Renewal Membership: []

Please find enclosed \$150 for new/renewal membership for up to two individuals from the same member Company.

Please find an additional \$50 for each additional member. (See Page 2)

MEMBER COMPANY: _____

COMPANY ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

OFFICE TELEPHONE: _____ FAX NUMBER: _____

Company Representative #1: _____

POSITION: _____

E-MAIL ADDRESS: _____

Company Representative #2: _____

POSITION: _____

E-MAIL ADDRESS: _____

Please note: Should your Company have additional members it would like to register, please use page 2 of this form. **Membership renews each August.**

(intentionally left blank)

Please find an additional \$50 for each additional member.

Company Representative #3: _____

POSITION: _____

E-MAIL ADDRESS: _____

Company Representative #4: _____

POSITION: _____

E-MAIL ADDRESS: _____

Company Representative #5: _____

POSITION: _____

E-MAIL ADDRESS: _____

Company Representative #6: _____

POSITION: _____

E-MAIL ADDRESS: _____

Recap of Dues:

Company Membership (two company representatives) \$150

choose # of additional Members _____ and hit tab button to calculate _____
((\$50 ea additional member)

Total due the South Louisiana Chapter of RIMS:

To pay by check: Choose SUBMIT FORM and mail check to the address below.

To pay via Paypal: Select PAY VIA PAYPAL. Your completed form will be forwarded via email and you will be sent to PayPal.

MAKE CHECK PAYABLE TO:
South Louisiana Chapter of RIMS
C/O: Kelly Camenzuli
5000 W. Esplanade Avenue #298
Metairie, LA 70006

Please do not staple check to application.
Tax I.D. #: 72-0947250

FOR SLC-RIMS USE ONLY:

Paid \$ _____ on ____ / ____ / ____ Application Accepted by Board _____

Email Address updated on ____ / ____ / ____ by _____