



## Life Insurers Council Access Form For Current LOMA/LIMRA Members

Any dues-paying member of LOMA or LIMRA may use this form to request access to LIC benefits and services. If your company is not a member of LOMA or LIMRA, please apply for membership at the following link and check the LIC box in Section II: [www.loma.org/en/about/membership/becoming-member/](http://www.loma.org/en/about/membership/becoming-member/).

Date: \_\_\_\_\_

Company: \_\_\_\_\_

requests access to the Life Insurers Council and agrees to pay an annual fee established by the Council as approved by LOMA's Board of Directors. A check is enclosed covering the 2021 LIC Annual Access Fee of (check one below):

<input checked="" type="checkbox"/>	Category	2021 LIC Access Fee
<input type="checkbox"/>	Insurance Companies paying less than \$15,000 in LOMA Dues, or less than \$50,000 in LIMRA Dues	\$2,525
<input type="checkbox"/>	Insurance Companies paying \$15,000 or more in LOMA Dues, or \$50,000 or more in LIMRA Dues	\$6,490
<input type="checkbox"/>	International Members	\$960
<input type="checkbox"/>	Affiliate Members (Vendors/Service Providers)	\$960

\_\_\_\_\_  
Officer (Key Contact for LIC Correspondence)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Email

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
City/State/Zip/Country

Mail this form with payment in US Dollars to: **LOMA**  
**PO Box 660**  
**Bridgeport, CT 06601-0660**