



**Independent
Insurance
Agents of Texas**

Helping Members Succeed
1115 San Jacinto, Ste. 100, Austin, Texas 78701
P. O. Box 684487, Austin, Texas 78768
800.880.7428, 512.476.6281, fax 512.469.9512, iiat.org

Student Membership Application

As a student pursuing a degree related to the insurance industry, but in a capacity other than an independent insurance agent, I wish to apply for Student Membership in the Independent Insurance Agents of Texas.

Membership Benefits

I understand this membership entitles me to receive IIAT's periodic publications and access IIAT's members-only web site. In addition, it provides access to products, educational programs, and conferences at reduced rates. This membership does not include membership in the Independent Insurance Agents & Brokers of America, nor in a local association of independent agents.

IIAT welcomes all industry professionals who meet eligibility requirements for membership and leadership regardless of race, ethnicity, gender, religion or nationality.

Student Information

Student name _____

* Temporary address

* Permanent address

City, State, ZIP _____

City, State, ZIP _____

Telephone () _____

Fax () _____

E-mail _____

Birth date (MM/DD/YY) _____

*indicate your preferred mailing address

Dues: \$25

The student membership year is January 1–December 31. Renewal dues are payable January 1 each year.

Tell Us About Yourself

School _____

Major _____

Degree pursued Associates Bachelors Graduate

Expected Graduation Date _____

By checking this box, I attest that I am a student and have a valid student I.D.

Hometown _____

How did you hear about IIAT? _____

What do you hope to get from your IIAT membership? _____

Payment Information

If you have any questions, please call us on the member services hotline, 800.880.7428, or 512.476.6281.

Check enclosed for \$ _____

Visa Mastercard American Express \$

Name on card _____

Account # _____

Exp. Date _____

/

Cardholder's Signature _____

Mail this application to IIAT, P.O. Box 684487, Austin, Texas, 78768 or fax to 512.469.9512

For Office
Use Only

Member # _____