

Surplus Line Association of Oregon Membership Application

To become a member in the Surplus Line Association of Oregon, you must hold a current Oregon Surplus Line License. For licensing information, contact Denise Ricketts of the State of Oregon Insurance Division at 503.947.7261.

(Note: Association membership is available only to <u>individual</u> licensees, NOT to <u>corporate</u> licensees).

	Contact Informat	.1011.				
	Name (of Individual Oregon Surplus Line Licensee)					
	E-mail Address (of Individual Oregon Surplus Line Licensee)					
	Phone					
	Firm Name					
	Street				 '	
	City, State, Zip Cod	le				
•	License Informat	ion:				
	Oregon Surplus Line License Number					
	Check one:					
	Resident					
		<i>or</i> n-Resident [
•	I do hereby apply	y for members	ship in the Sur _l	olus Line Associa	ation of Oregon.	
	I accept and pled	lge adherence	to the Articles	of Incorporation	on and By-Laws	of the Association.
	(Note: Articles of	^f Incorporation	n and By-Laws	may be viewed	on the website	- www.OregonSLA.org
	Signature:	Must be signature	of Oregon Surplus Line	Licensee		
	Print Name:	_	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Date Signed:					
	Date Signear					

Complete this form and return with a \$25 check (one-time membership application charge) to:

The Surplus Line Association of Oregon, 7360 SW Hunziker Street, Suite 105, Portland, Oregon 97223-2305

Questions? E-mail info@OregonSLA.org or call 503.718.6700.