



NEW MEMBER APPLICATION

BUILDING THE LEADERS WHO BUILD THE INSURANCE, INVESTMENT & FINANCIAL SERVICES INDUSTRY

Applicant Information (Please print or type clearly)

Personal Information

Mr. | Ms. | Mrs. | Other | Male | Female

Name _____

Designations _____

Title _____

SSN # XXX - XX - (_____)

Preferred Address

Where do you prefer to receive mail?

Business | Home

Company Affiliation _____

Agency / Firm Office Name _____

Street Address 1 _____

Street Address 2 _____

City _____ State _____

Country _____ ZIP Code _____

Business Phone _____

Business Fax _____

Toll-Free Number _____

Business Email Address _____

Other Information

Referred by _____

Please indicate your preferred method of receiving communication from GAMA: Email Fax Mail

Years in Industry _____

Years in Field Management* _____

Date of Birth* ____ / ____ / ____

*Members under the age of 40 or with fewer than 5 years of industry management experience will be automatically enrolled in GAMA's LoTT (Leaders of Today and Tomorrow) program at no extra charge. Should you wish NOT to be a part of this program, check here.

Applicant Profile

Which of the following best describes your role?

Regular Member (Please choose one)

- First-Line Management (Head of Firm or Agency):** Responsible for the strategic leadership and operational management of a financial services firm or agency
- Frontline Management (Sales or Unit Manager):** Responsible for recruiting, selecting, training, supervising, or coaching financial services advisors or agents
- Home Office Executive:** Responsible for providing key supervision or support to the corporation's field leaders or sales force

Functional Specialist

Noncommissioned firm or agency specialist who plays an important role in today's field leadership teams, such as recruiters, marketing directors, equity specialists, or trainers (Please choose one):

- | | |
|-----------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Recruiting | <input type="checkbox"/> Compliance |
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Training | <input type="checkbox"/> Business Operations |
| <input type="checkbox"/> Equity / Investments | <input type="checkbox"/> Other: _____ |

Associate Member

- Anyone not eligible for one of the above member categories but who is interested in promoting the objectives of GAMA International

3 Ways to Join GAMA International

1. **FAX** this form and credit card information to 571-499-4302
2. **ONLINE** at www.gamaweb.com/membership/joinnow.htm
3. **MAIL** with payment to: GAMA INTERNATIONAL
2901 TELESTAR COURT
SUITE 140
FALLS CHURCH, VA 22042

QUESTIONS? Call 888-275-0091 for assistance.

Payment Information

Types of Membership:	Regular Member	Functional Specialist	Associate Member
<i>Enrollment Periods</i>			
January – April	<input type="checkbox"/> \$375 (current year)	<input type="checkbox"/> \$187.50 (current year)	<input type="checkbox"/> \$475 (current year)
May – August	<input type="checkbox"/> \$285 (current year)	<input type="checkbox"/> \$140 (current year)	<input type="checkbox"/> \$356 (current year)
September – December	<input type="checkbox"/> \$375 (upcoming year)*	<input type="checkbox"/> \$187.50 (upcoming year)*	<input type="checkbox"/> \$475 (upcoming year)*
<p>In some instances, companies subsidize individual membership dues. We will contact you within 72 hours to confirm your membership and any possible reduction in the cost of your dues.</p> <p>* Includes dues through December of the upcoming year.</p>			
		<input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> American Express	Expiration Date / / Billing ZIP Code Amount Card Security Code Credit Card Number Signature
FOR MORE INFORMATION OR TO APPLY ONLINE, VISIT WWW.GAMAWEB.COM OR CALL 888-275-0091.			

Member Demographics

Personal range of income last year:	Please indicate your areas of interest:	My market is best described as:
<input type="checkbox"/> Under \$100,000 <input type="checkbox"/> \$100,000 – \$249,999 <input type="checkbox"/> \$250,000 – \$499,999 <input type="checkbox"/> \$500,000 – \$749,999 <input type="checkbox"/> \$750,000 – \$999,999 <input type="checkbox"/> \$1,000,000 – \$2,499,999 <input type="checkbox"/> \$2,500,000 and up	<input type="checkbox"/> Leadership & Culture <input type="checkbox"/> Recruiting & Selection <input type="checkbox"/> Sales & Marketing <input type="checkbox"/> Supervision & Accountability <input type="checkbox"/> Producer Development <input type="checkbox"/> Retention <input type="checkbox"/> Team Building	<input type="checkbox"/> Traditional Life <input type="checkbox"/> Fee-Based Planning <input type="checkbox"/> Equities / Investments <input type="checkbox"/> Multiline / Property and Casualty <input type="checkbox"/> Middle Market <input type="checkbox"/> Fraternal <input type="checkbox"/> Other _____

Terms of Membership

- In consideration of my acceptance as a member of GAMA International, I certify that —
1. I consent to be governed by the bylaws of the association.
 2. I have never been found guilty of any violation of any insurance law or regulation, or any other state or federal law (except minor traffic violations), and have never been disciplined by, expelled from, or refused membership in any voluntary association. (Attach full written explanations of any exemptions to the foregoing.)
 3. I agree that neither the association nor its individual members, officers, directors, agents, or employees shall be liable to me, individually or jointly, if this application for membership is rejected or for the consequences of any disciplinary or penal action that may be sought or taken against me under the insurance laws of this or any state of jurisdiction.
 4. I am a member in good standing of a local association of the National Association of Insurance and Financial Advisors (NAIFA).

As a benefit of membership, I understand and agree that GAMA will seek to keep me informed of industry news and association programs, promotions, and updates through a variety of sources such as its magazine, newsletters, faxes, and emails. I also understand that as a member benefit, I will receive news and promotional emails from the LIFE Foundation.

Our Anti-Proselytizing Position

- **Development.** Proselytizing financially penalizes those organizations that invest in new producer acquisition and development.
- **Critical Mass.** Proselytizing shrinks and diminishes our industry.
- **Professionalism.** Proselytizing encourages colleagues to function as competitors, damaging efforts to build and develop the industry through the sharing of best practices.
- **Market Impact.** Proselytizing distracts us from addressing ignorance and apathy in the marketplace as we invest time and energy in cannibalizing each other's resources.
- **Consumer Impact.** Proselytizing leads to the replacement of existing business that is generally not in the best interest of the consumer.
- **Financial Results.** There is no evidence that buying distribution is less expensive than growing it.

Growth Through Proselytizing Is Destructive to Our Industry. There are no short-term answers to long-term success.



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