



NATIONAL

BEAGLE

ASSOCIATION  
Est. 1959

Dear Beagler,

Thank you for your interest in the National Beagle Association. For more than 40 years, we've been protecting our clubs by securing affordable liability insurance. We are not an insurance company but an association made up of non-profit beagle clubs like yours. Our founder, Ev Stineman, was a passionate beagler who recognized that protecting clubs from lawsuits furthered the sport. We buy our insurance as a group, therefore at a lower rate than many clubs might find on their own. Our 2010 insurance policies cover both spectators and judges during club events. If you do have a claim, National Beagle Association pays the deductible so that there is no cost to your club.

- Our spectator liability coverage is \$500,000 per occurrence/\$500,000 aggregate. Membership dues are \$330.00, which cannot be prorated. Unlike some other policies out there, there is no deductible, no limit to the number of covered events, and no limit to the number of members our clubs may have. Our judges and volunteers are also covered for up to \$5,000 in medical expenses and up to \$50,000 death and dismemberment benefit.
- For your convenience, you may request additional insured endorsements when you send in your application. The cost is \$65 per additional insured. You may also request these at any time throughout the year.

Thank you again for your interest. We look forward to welcoming your club as a new member.

Best regards,

A handwritten signature in cursive script that reads "Angel".

Angel Schroeder  
Club Secretary

## National Beagle Association 2010 Benefits of Membership

Spectator Liability Insurance	<p>\$500,000 per occurrence/                      \$500,000 Aggregate                      \$500,000 Products Liability                      \$500,000 Advertising/Personal Liability                      \$50,000 Fire Liability</p> <p><b>No deductible</b> (covered by NBA)                      Number of Members Covered                      Scheduled Club Events                      Additional Insured Endorsements</p>	<p><b>Included in membership (\$330)</b></p> <p><b>Unlimited                      Unlimited                      \$65 each</b></p>
Accidental Death and Dismemberment Benefit	\$5,000 medical expense coverage for judges and field marshals up to \$50,000 death/dismemberment benefit	<b>No Charge</b>
Newsletter	Includes insurance and safety information.	<b>No Charge</b>
\$1,500 Bond for your club's treasurer	Check box on application or contact our office if you'd like to take advantage of this benefit.	<b>No Charge</b>
Web Site Access	Insurance information, forms, newsletter.	<b>No Charge</b>

**Membership Dues: \$330.00** (1/1/10 – 1/1/11)

**2010 MEMBERSHIP APPLICATION**

**NATIONAL BEAGLE ASSOCIATION, INC.**

P.O. Box 5454 • High Point, NC 27262 • 888-435-6464 • fax 336-217-8924 • www.nationalbeagle.com

Renewal       New Member (How did you hear about us? \_\_\_\_\_)

**Date of application** \_\_\_\_\_

Club Name \_\_\_\_\_

Location of Home Grounds (if any) \_\_\_\_\_

Our Grounds are:     Rented     Leased     Owned     Donated

Number of Members \_\_\_\_\_

Approximate number of club-organized activities in a calendar year \_\_\_\_\_

Sanctioning Affiliation  AKC     ARHA     Other \_\_\_\_\_

Correspondent's Name \_\_\_\_\_

Title:  President     Secretary     Treasurer     Other \_\_\_\_\_

Address \_\_\_\_\_

This is:  the club's address only     my personal address also.

Phone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_

Email address \_\_\_\_\_

Club's Web Site \_\_\_\_\_

We would like to receive (check all that apply)     Bond Application     Sample of Hold Harmless Agreement

**2010 OFFICERS**

*Please fill in addresses and phone numbers for at least two officers. If officers change during the year, please notify us as promptly as possible.*

**President** \_\_\_\_\_  
Name

Home Address \_\_\_\_\_  
Street, P.O. Box, Apt. #                      City                      State    Zip                      Home Phone

**Secretary** \_\_\_\_\_  
Name

Home Address \_\_\_\_\_  
Street, P.O. Box, Apt. #                      City                      State    Zip                      Home Phone

**Treasurer** \_\_\_\_\_  
Name

Home Address \_\_\_\_\_  
Street, P.O. Box, Apt. #                      City                      State    Zip                      Home Phone

*Memberships are on a calendar year basis (January 1 to December 31). Liability insurance covers your club from the date you join (or renew) through December 31, 2010. **Dues cannot be refunded or pro rated.** Benefits of membership apply to your club only during canine events sponsored, organized, or attended by the member club. Benefits do not apply to work parties.*

