

MARYLAND PTA INSURANCE PROGRAM 2009 INVOICE & ENROLLMENT FORM

LIABILITY

01. Legal Liability Insurance Protection
02. \$1,000,000 Per Occurrence Limit/\$2,000,000 Annual Aggregate Limit Per PTA Unit

BONDING

01. Crime Coverage
 - a. Employee Dishonesty \$25,000 Limit \$500 Deductible
 - b. Forgery Or Alteration \$25,000 Limit \$500 Deductible
 - c. Theft, Disappearance And Destruction Of Money And Securities
 - (1) Loss Inside The Premises \$ 25,000 Limit \$500 Deductible
 - (2) Loss Outside The Premises \$ 25,000 Limit \$500 Deductible

DIRECTORS & OFFICERS LIABILITY

01. Wrongful Act Liability Insurance Protection For Directors And Officers
02. \$1,000,000 Per Occurrence Limit/\$1,000,000 Annual Aggregate

Name of Officer and Title completing the Application

GENERAL INFORMATION

PLEASE PRINT

01. PTA Unit Contact Name: _____
First M.I. Last
02. PTA Unit Contact Address: _____
Street City State Zip
03. PTA Unit Contact Home Phone: _____
Area Code Number
04. PTA Unit Contact Email: _____
05. PTA Unit Name: _____
06. PTA Unit Mailing Address: _____
Street City State Zip
07. Name of the County you are in: _____

INSTRUCTIONS TO PURCHASE (Please check appropriate box)

01. Policy effective 10/01/09 – 10/01/10 \$179 **AFTER 10/10/09 ADD A \$25 LATE FEE, TOTAL: \$204.**
02. Send payment **check** and **completed Enrollment Form** to:
BB&T INSURANCE SERVICES OF CALIFORNIA, INC.
535 North Brand Blvd., 10th Floor
Glendale, CA 91203
02. For questions or enrollment at any time please call **Kathy Meagher, Joy Brassell or Jennifer Burgh.**
Toll Free: 866-611-9400 - FAX (888) 770-1883 – mdpta@bbandt.com