BIG I | MISSISSIPPI

ASSOCIATE MEMBERSHIP 2027



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Associate Membership

Designed for those looking to build stronger relationships with independent agents in Mississippi. This membership offers a direct way to connect with our agents, grow your visibility, and expand your business within the state.

Why Join as an Associate Member?

- **Big I Mississippi Membership Directory**
  Get your business listed where agents look first, boosting visibility and connections.
- **Added to All Communication Lists**
  Never miss important updates, opportunities, or industry news - we will keep you in the loop.
- **Big I Mississippi Magazine**
  Receive issues each year filled with exclusive insights, news, and member spotlights.
- **Recognition as a Supporter**
  Stand out as a trusted member and show your commitment to Mississippi independent agents.
- **Member Registration Fees**
  Access discounted member rates for every Big I Mississippi conference and event.

Being an associate member of Big I Mississippi is a great way to keep up with our many activities throughout the year. Your membership also lets agencies know you support the association. **Associate membership dues are renewable on January 1.**

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2027 ASSOCIATE MEMBER FORM

COMPANY INFORMATION

Company Name: _____

Company Address: _____

Company Website: _____

Phone: _____ Email: _____

Main Contact Name: _____ Billing Contact (if different) _____

ASSOCIATE MEMBERSHIP CONTACTS

Please confirm the two contacts for our membership database and annual Membership Directory. **The membership directory will include the name, email, and phone number.**

ASSOCIATE A

Name _____

Mailing Address _____

_____

Email _____

Phone _____

ASSOCIATE B

Name _____

Mailing Address _____

_____

Email _____

Phone _____

Associate Membership Dues: $1,000

Payment Options:

☐ **Make Check Payable to:**

Independent Insurance Agents of Mississippi

Return Completed Forms to:
slane@msagent.org or mail to
P.O. Box 321474
Flowood, MS 39232

☐ **Pay via Credit Card**

Credit card payments may also be emailed to slane@msagent.org. **Please Note:** Credit card payments include a 3% processing fee, which will be added to your total.

Card Number: _____

Signature: _____

ZIP Code: _____ **Exp. Date:** _____ **Security Code:** _____

In compliance with regulations, I consent to the receipt of emails and other correspondence sent to my company from IIAM, IIABA and its subsidiaries. IIAM dues are not deductible as a charitable contribution, but are deductible by members as an ordinary and necessary business expense. A portion of the dues, however, is not deductible to the extent that IIAM is engaged in lobbying efforts. The nondeductible portion of dues for the year is 3%.

I agree to all terms and conditions outlined in this agreement.

Signature _____ **Date** _____