



PIA SERVICES GROUP  
INSURANCE FUND

# BASIC TERM LIFE PROGRAM

## CENSUS FORM

This is not an application for insurance.

Agency Name: \_\_\_\_\_ Sponsoring Member's Name: \_\_\_\_\_

Effective Date of Membership: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ email: \_\_\_\_\_

Member's/Employee's Name	Gender (M/F)	Date of Birth	Date of Hire	Hours/Week	Class*	Amount of Coverage
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						

\* Class 1 = Individual proprietors, partners, corporate officers, limited liability partners and managers of Member Agencies; Trustees or Trust manager of PIA Services Group Insurance Fund; Persons employed as executive directors, department heads, division heads, or senior staff of the National Association of PIA, a local PIA affiliate, or PIA Services, Inc. (\$50,000);  
 Class 2 = Licensed employees and Independent Producers of Member Agencies (\$30,000);  
 Class 3 = All other employees of a Member Agency; PIA Services Group Insurance Fund; National Association of PIA or its local affiliates; and PIA Services, Inc. (\$20,000)

If additional space is needed, please refer to continuation of table on reverse side of this sheet.

I certify that this is a complete list of eligible employees and I agree to pay 100% of the premium for these employees.

\_\_\_\_\_  
Signature of Agency Owner/Partner/Officer/Agency Manager

\_\_\_\_\_  
Date

Administered by:

Lockton Risk Services  
P.O. Box 410679  
Kansas City, MO 64141-0679  
1-800-336-4759  
Fax: 913-652-7599

[www.piatruster.com](http://www.piatruster.com)

Underwritten by:

Unimerica Insurance Company  
Association Administrative Address:  
P.O. Box 17828, Portland, ME 04112-8828

Continued from front.

Member's/Employee's Name	Gender (M/F)	Date of Birth	Date of Hire	Hours/Week	Class*	Amount of Coverage
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						
21.						
22.						
23.						
24.						
25.						
26.						
27.						
28.						
29.						
30.						
31.						
32.						
33.						
34.						
35.						
36.						
37.						
38.						
39.						
40.						
41.						
42.						
43.						
44.						

\* Class 1 = Individual proprietors, partners, corporate officers, limited liability partners and managers of Member Agencies; Trustees or Trust manager of PIA Services Group Insurance Fund; Persons employed as executive directors, department heads, division heads, or senior staff of the National Association of PIA, a local PIA affiliate, or PIA Services, Inc. (\$50,000);  
 Class 2 = Licensed employees and Independent Producers of Member Agencies (\$30,000);  
 Class 3 = All other employees of a Member Agency; PIA Services Group Insurance Fund; National Association of PIA or its local affiliates; and PIA Services, Inc. (\$20,000)