**APPLICATION FOR INSURANCE INFORMATION BUREAU**

1. **MEMBERSHIP JOINING FEES**

*Individual Membership Joining Fee* – KES. 10,000

*Corporate Membership Joining Fee* – KES. 150,000

1. **ANNUAL SUBSCRIPTION FEES**

Individual subscription – KES 5,000

Corporate Subscription – KES 100,000

After completing the membership Application, please return it with supportive document to the above address and pay membership fees.

1. **BENEFITS OF MEMBERSHIP**

* **Innovative Resources and Tools**

As a member of the Insurance Information Bureau, you will have access to our un-limited members-only resources;

* Member-only content which includes latest insurance research articles on various topics and an extensive archive.
* IIB e-newsletters on latest developments in the insurance markets.
* A 10% discount on any individual research consultancy assignment you request IIB to do for you.
* **Interactive Platform**

This is a platform where you are able to connect exchange information and ideas on what`s happening in the markets.

* Integrate and network with other peers in the region.
* Connect with local business resources.
* Opportunities to present and facilitate at IIB conferences
* Opportunities to be sent by IIB as resource persons at IIB and partner conferences and or training events
* **Conferences and Training**

Members receive significant discounts on all local and international IIB events.

* 10% discount on conference and workshops attendance
* 10% discount on research consultancy work
* 10% discount on our training facilities
* **Industry Publication**

IIB will publish quarterly insurance magazines and an annual banking, MFIs and insurance survey and other publications. The membership entails one of the publications (magazine, survey or any journal of your choice).

* **Continuous Performance Development**

IIB training programs in partnership with the Chartered Insurance Institute UK School will enable participants to earn CPD points on all our conferences/workshops and training.

**APPLICATION FOR CORPORATE MEMBERSHIP**

* Corporate membership of the institute is open to any company or body who satisfy the IIB council that they are fit and proper to be admitted to membership. The Institute particularly values the corporate membership because it indicates confidence in and support for the work that the institute is doing. Such expressions of support encourage us in our effort to strengthen the Institute which will be able to provide services to members more effectively.

**HOW TO APPLY FOR INDIVIDUAL MEMBERSHIP**

* Forward or hand deliver a completed application form to the IIB or our administration staff or via the IIB email. The membership committee meets monthly to consider and approve application for membership and promotion to higher classes of membership. The decision of the committee is immediately communicated to applicants.
* Successful applicants are advised of the payments required which must be received within a period of one month otherwise the approval ceases to be valid. The applicant does not become a member of the institute until he/she has made the required payments.
* After making the payments, the member receives a membership certificate. Payment should accompany the application form dully signed by the member if individual and the company representative for corporate membership.

**ANNUAL RENEWAL OF MEMBERSHIP**

* The membership is renewed annually by payment of an annual subscription fees, members receive a card that confirms current validity of their membership. Otherwise, their membership certificates ceases to be valid.

**MEMBERSHIP AND SUBSCRIPTION FEES**

* These are revised from time to time. The schedule of current fees will be attached to the membership application form schedule of subsequently revised fees will be readily forwarded on request.

**MEMBERSHIP FORM DETAILS**

**1. Contact Information – Corporate Membership**

Top of Form

Name of organization: 

Contact person: 

Job title: 

Address:





City: State: Zip: 

Phone Number: 

Fax Number: 

Email: 

**INDIVIDUAL MEMBERSHIP DETAILS**

**Contact Information – Individual Membership**

Top of Form

Names: 

Company: 

Job title: 

Address:





City: State: Zip: 

Phone Number: 

Fax Number: 

Email: 

Next of Kin: 

Contact of next of Kin: 