



Insurance Women
of San Antonio

Insurance Women of San Antonio
First Vice President - Membership
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P.O. Box 461083
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2026-2027 IWSA Membership Form

IWSA is a professional organization of women and men in the insurance industry and related support companies. Formed in March 1944, our purpose is to promote education for members, provide scholarships to area students, and contribute to the community through charitable service. We are one of 9 local associations included in the Federation of Insurance Women of Texas Inc. (FIWT)

Date of Application: _____

Application Type

☐ New Member ☐ Renewal

Membership Categories

Active: The membership of the association shall be any person employed in the insurance related industries.

Active Associate: Membership may be granted to any member of the association provided:

- A member has become ineligible for active membership due to retirement;
- A member in good standing at the time they became ineligible for active membership;
- A member has held active membership for at least five (5) continuous years;
- A member has held an elective office or appointed Board Chairman for at least three (3) years of membership;

All privileges of active membership would apply to this membership classification. The dues would be the same as set forth for an active member of the association.

Dual Membership:

Any person employed in an insurance industry that holds a voting membership in another FIWT local association shall only be eligible for a non-voting membership in the INSURANCE WOMEN OF SAN ANTONIO, INC., and may not serve on the Executive Board as an officer or as a committee person.

Honorary Associate

Anyone who has been a member for one year or more and retires from the insurance business can become an Honorary Associate without a vote. No dues are required, but a completed application for communication purposes must be received by IWSA each fiscal year (June 1 through May 31)

Membership Type

- ☐ Active \$75.00 membership fee
- ☐ Active Associate \$75.00 membership fee
- ☐ Dual Membership \$25.00 membership fee
- ☐ Honorary Associate: \$0.00 membership fee

How did you hear about IWSA? Referred By?

Name

Birthday

Month/Date/Year

Preferred Email

Preferred Phone Number (Cell or Work)

Preferred Address (Resident or Work)

Street Address

City, State & Zip Code

Job Function

- ☐ Agency Owner
- ☐ Risk Management
- ☐ Clerical
- ☐ Claims
- ☐ Adjuster
- ☐ Accounting
- ☐ Marketing
- ☐ Underwriting
- ☐ Premium Finance
- ☐ Other

Number of Years

- ☐ 0 - 5
- ☐ 6 - 10
- ☐ 11 - 15
- ☐ 16 - 20
- ☐ 21 - 25
- ☐ 26 - 30
- ☐ 30 +
- ☐ 40 +

Professional Designation - Please mark all that apply:

- ☐ PIWT
- ☐ ACSR
- ☐ Dual ACSR
- ☐ CISR
- ☐ CIC
- ☐ AIA
- ☐ AU
- ☐ CPCU
- ☐ CIPT
- ☐ ARM
- ☐ OTHER:
-

Employer Information

Employer

Work Phone Number

Employer Address

Street Address

City, State & Zip Code

Job Title

Employer Type

- ☐ Insurance Agency ☐ Adjusting Firm ☐ Trade Association ☐ Insurance Company
☐ Managing GA ☐ Retired ☐ Premium Finance
☐ Other:

Type of Business (Mark all that apply)

- ☐ Property/Casualty
☐ Life/Health/Accident
☐ Finance
☐ Other:

Month/Year You First Joined IWSA

Are you a member of another Local Organization under FIWT (Dual Membership)?

- ☐ Yes
☐ No

If yes, which local organization(s)?

Which local is your designated main local?

Does IWSA have your permission to include your information in our Yearbook?

- ☐ Yes
- ☐ No

What committees would you be interested in serving on? (Mark all that apply)

- ☐ Community Service

☐ Welcome/Name Tags
- ☐ Young Insurance Professionals

☐ Fundraising
- ☐ Bingo

☐ Social Media/Website
- ☐ Christmas Party & Officer Installation

☐ FIWT Convention
- ☐ Golf Tournament

☐ Yearbook/Scrapbook
- ☐ Membership

☐ Bylaws/Budget/Audit
- ☐ Other

To help us better serve our members, we'd love to hear from you. In a few short sentences, please share what you hope to gain from your membership in Insurance Women of San Antonio.