

## Choose your membership level

LIMRA and LOMA

Receive all LOMA and LIMRA membership access and benefits.

LIMRA

Access to LIMRA research, committees/study groups, conferences, and member pricing for the product distribution areas of your company.

LOMA

Access to LOMA education and training, committees, conferences, and member pricing for the operations areas of your company.

### Optional membership

Life Insurers Council (LIC)

Smaller life companies face different challenges and require different solutions than larger carriers. The LIC provides a network that facilitates the opportunity for smaller companies to ask questions and share best practices with their peers at similar companies.

## Information about your company

Company Name			
Company Address			NAIC ID Number
City	State or Province	Country	Postal or ZIP Code
Website Address	Phone Number		Date Founded
Mailing Address (if different)			
City	State or Province	Country	Postal or ZIP Code
Companies to be Included in the Membership			
Reason for Joining			

Who in your company will be our primary contact?	First Name	Last Name	Email
Who in your company should receive the membership invoice?	First Name	Last Name	Email

## Information about your business

Please indicate the approximate percentage of your organization's revenue attributed to each of the following lines of business (total should 100%)

Insurance (Individual Life, DI, LTC, P&C, etc.)	Workplace Benefits (Group, Worksite, Voluntary Benefits)	Retirement
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Please identify the most senior executive responsible for each business line:

	First Name	Last Name	Email
Insurance			
Workplace Benefits			
Retirement, Institutional			
Retirement, Retail			

## Membership announcement

Once your membership is fully processed (membership dues have been paid), may we announce your membership on social media (LinkedIn, Facebook, Twitter)?

Yes  No

Preferred Company Name

Contact Us  
 For questions about **U.S. and Canada** membership, please contact:  
 Email: [members@loma.org](mailto:members@loma.org)  
 Phone: 770-984-3744

## Information about your leadership

This information will be used to provide relevant industry updates and networking opportunities to senior leaders in your organization.

	First Name	Last Name	Email
Chief Executive Officer or President			
Chairman			
Chief Actuary			
Chief Compliance/Legal Officer			
Chief Customer Experience Officer			
Chief Customer Service Officer			
Chief Financial Officer			
Chief Human Resources Officer			
Chief Information Technology Officer			
Chief Learning & Development Officer			
Chief Marketing/Data Officer			
Chief of Operations			
Chief Product Management/Development Officer			
Chief Retirement Officer			
Chief Sales/Distribution Officer			
Chief Strategic Planning Officer			
Chief Underwriting Officer			
Head of Group Benefits			

### By completing this application, I understand that

- LIMRA and LOMA reserve the right to review a membership application and only accept members that serve the best interest of its membership.
- The amount of the annual dues shall be established each year by the Board of Directors.
- For LIMRA and LOMA or for LIMRA-only membership applications, a US\$300 application fee will be added to the dues invoice. All membership dues will be in U.S. funds.

### Application completed by

First Name	Last Name
Phone	Title
Email	

[Print Form](#)

[Email Form](#)

