



**Local Associations of United States Bowling Congress  
Non Profit Directors and Officers Liability Application & Warranty Letter  
Tokio Marine Specialty Insurance Company**

**Instructions:** Please type or print clearly. Answer ALL questions completely. This form must be **fully completed**, dated and signed by the President or Board Chairman of the association applying for this insurance.

Association Name & USBC Number: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Total Number of Association Members: \_\_\_\_\_

**Warranty Section:**

Within the last 5 years, has any claim been made, or is now pending, against the Organization, or any person proposed for this insurance in the capacity of Director, Trustee, Officer, or Employees? If yes, please provide details.

\_\_\_ Yes \_\_\_ No

Is any person proposed for this insurance cognizant of any fact, circumstance or situation which may result in a claim against the Organization or any of its Directors, Trustees, Officers, or Employees? If yes, please provide details.

\_\_\_ Yes \_\_\_ No

**Signature:** \_\_\_\_\_

Printed Name & Title: \_\_\_\_\_

Date: \_\_\_\_\_

Please determine your association's premium in the section below. Make your check payable to **Frost Insurance** and forward with the completed application to: **Frost Insurance, 640 Taylor St. Fort Worth, TX 76102**

<b>Local Membership Annual Premium</b>	<b>Annual Premium</b>
Up to 1000 members	\$210
1001 to 3500 members	\$463
3501 members and over	\$661

The anniversary date of coverage is August 1st. Applications received after September 30th will be effective the first of the month following receipt of the application, and will expire the following August 1st. There is no pro-ratio in the premium cost. Applications **will not be accepted after December 26, 2026**. Upon acceptance of your application, you will be sent a coverage confirmation document.

If you have questions or need assistance with these insurance programs, contact Jim Dickenson at Frost Insurance. 1.888.767.3627 or e-mail at [jim.dickenson@frostinsurance.com](mailto:jim.dickenson@frostinsurance.com) or Lucy Anderson at [lucy.anderson@frostinsurance.com](mailto:lucy.anderson@frostinsurance.com).