

**MARYLAND PTA INSURANCE PROGRAM**  
**2017 INVOICE & ENROLLMENT FORM**  
**PLEASE PAY BY 7/1/2017 TO AVOID A LATE FEE**

**INSTRUCTIONS TO PURCHASE**

01.  Policy effective 7/1/2017 -7/1/2018– Premium - **\$212**  
**\$25 late assessment for payments received after 7/1/2017 – Premium due after 7/1/2017 is: \$237**

02. Send payment **check** and completed Enrollment Form to: **Knight Insurance Services, Inc.**  
**535 North Brand Blvd., Suite# 1000**  
**Glendale, CA 91203**

**GENERAL INFORMATION** **PLEASE PRINT**

01.  \_\_\_\_\_  
**Name of Officer and Title completing the Application**

02. Name of the your PTA Unit’s County: \_\_\_\_\_

03. PTA Unit’s Name: \_\_\_\_\_

04. **PTA Unit Contact Email (IMPORTANT!** \_\_\_\_\_  
The email address is where we will send the Loss Prevention Guide):

05. PTA **Unit Mailing Address:** \_\_\_\_\_  
Street City State Zip

06. PTA Unit Contact Name: \_\_\_\_\_  
First M.I. Last

07. PTA Unit Contact Home Phone: \_\_\_\_\_  
Area Code Number

**DIRECTORS & OFFICERS LIABILITY**

- 01. Wrongful Act Liability Insurance Protection for Directors and Officers
- 02. \$1,000,000 per Occurrence Limit/\$1,000,000 Annual Aggregate

**Liability**

- 01. Legal Liability Insurance Protection
- 02. \$1,000,000 per Occurrence Limit/\$2,000,000 Annual Aggregate Limit per PTA Unit

**Bonding - Crime Coverage**

- a. Employee Dishonesty \$25,000 Limit \$500 Deductible
- b. Forgery or Alteration \$25,000 Limit \$500 Deductible
- c. Theft, Disappearance and Destruction  
Of Money and Securities
  - (1) Loss Inside The Premises \$25,000 Limit \$500 Deductible
  - (2) Loss Outside The Premises \$25,000 Limit \$500 Deductible

For questions or enrollment at any time please call **Jennifer Burgh, or Manuel Hamme.**  
**Toll Free: 800-733-3036 - FAX (818) 662-9312 – PTAMD@Knightins.net**