

Online membership application is available with a credit card through "Membership" at www.arias-us.org.



MEMBERSHIP APPLICATION

AIDA Reinsurance & Insurance Arbitration Society
222 S Riverside Plaza, Suite 1870, Chicago, IL 60606
Phone: 773-913-2004
Email: info@arias-us.org

NAME & POSITION

COMPANY OR FIRM

STREET ADDRESS

CITY/STATE/ZIP

PHONE

CELL

FAX

EMAIL

FEES AND ANNUAL DUES

Membership Type	Dues Amount
ARIAS Company Type (Number of Members)	
(A) Law Firms, Consulting & Actuarial Firms (1 - 5)	\$3,000
(B) Law Firms, Consulting & Actuarial Firms (6 - 10)	\$3,500
(C) Law Firms, Consulting & Actuarial Firms (11 +)	\$5,650
Insurance/Reinsurance Companies (1 - 15)	\$3,000
Individual Membership	\$500

Names of designated corporate representatives must be submitted on corporation/ organization letterhead or by email from the corporate key contact and include the following information for each: name, address, phone, cell, fax and e-mail.

PAYMENT INFORMATION

Payment by check: Enclosed is my check in the amount of \$ _____

Please make checks payable to ARIAS•U.S. (Fed. I.D. No. 13-3804860) and mail with registration form to:

By First Class mail: ARIAS•U.S., P.O. Box 5754, Carol Stream, IL 60197-5754

By Overnight mail: ARIAS•U.S., Lock Box # 766599, 270 Remington Blvd, Suite A&B, Boilingbrook, IL 60440

Payment by credit card: Call 773-913-2004 or use the online form here: <https://arias.memberclicks.net/membership-form>.

AGREEMENT

By signing below, I agree that I have read the ARIAS•U.S. Code of Conduct and the Bylaws of ARIAS•U.S. and agree to abide and be bound by the ARIAS•U.S. Code of Conduct and the By-Laws of ARIAS•U.S. The Bylaws are available at www.arias-us.org under the "About ARIAS" menu. The Code of Conduct is available under the "Resources" menu.

SIGNATURE OF INDIVIDUAL
OR CORPORATE MEMBER APPLICANT
