

**INDIANA EXTENSION  
HOMEMAKERS ASSOCIATION  
INSURANCE ELECTION FORM  
8/1/2017 – 7/31/2018**

Chose One:

\_\_\_\_\_ Local Club Name \_\_\_\_\_  
\_\_\_\_\_ County Name \_\_\_\_\_  
\_\_\_\_\_ District Name \_\_\_\_\_

**LIABILITY INSURANCE**  
(To be completed only by counties)

Total # of members in county	_____
Times cost per member	X _____ 1.20
Total cost (multiply # of members by 1.20)	\$ _____

**TREASURER DISHONESTY/FIDELITY BOND**

Chose One:

\_\_\_\_\_ Local Club Treasurer – Cost \$50 (\$25 if after 2/1/2018)  
\_\_\_\_\_ County Treasurer – Cost \$50 (\$25 if after 2/1/2018)  
\_\_\_\_\_ District Treasurer – Cost \$50 (\$25 if after 2/1/2018)

**Total Cost for the 8/1/17-7/31/18 year. (Add Liability & Bond Cost) \$ \_\_\_\_\_**

**Make check payable to IEHA**

**MUST BE POSTMARKED NO LATER THAN JUNE 15, 2017**

(Coverage elected after 8/1/2017 will be effective on the first day of the month following the date this form is received)

**Send original form and payment to:**  
Janet Gogel  
3757 So. 75 E.  
Huntingburg, IN. 47542

**To request proof of Insurance please email**  
Heather McCormick @MBAH Insurance  
hmccormick@mbah.com  
765-420-1337

Insurance provided by MBAH and Cincinnati Insurance Company