

Retired Law Enforcement Officer Self-defense Application for Coverage



For NRA Members Only

Name _____

Current NRA Member? Yes No NRA Member Number _____

Address _____ NRA Membership Exp. Date _____

City _____ Telephone # _____

State _____ Zip _____ Email _____

Choose Your Coverage

	<u>Total Annual Premium</u>
\$25,000 Limit	
Personal Firearms Liability & Self-defense*	\$50.00
\$50,000 Limit **	
Personal Firearms Liability & Self-defense*	\$75.00
\$100,000 Limit	
Personal Firearms Liability & Self-defense*	\$135.00
\$250,000 Limit	
Personal Firearms Liability & Self-defense*	\$205.00

* Self-defense coverage is available only in conjunction with Personal Firearms Liability coverage. Total annual premium amount shown is for both coverages. Self-defense coverage also includes reimbursement for Criminal Defense Expenses up to a maximum limit \$50,000.

Total Annual Premium for Selected Coverage \$ _____

NRA New Member Dues (If you are not a current NRA Member, add \$40) \$ _____

Nonrefundable Program Administrator Service Charge \$ 20.00 _____

Sub Total (Premium plus Member Dues plus Program Administrator Service Charge) \$ _____

State Tax (Multiply Sub Total by 2.275% if IN; 3.77% if NY; 2.275% all other) \$ _____

Total Amount Due
Add State Tax to Sub Total \$ _____

Non-transferable

Agreement: As an NRA member, I hereby apply for coverage under the NRA Endorsed Personal Firearms Liability & Self-defense Insurance Plan. I understand that my coverage will become effective upon the receipt of my approved application and premium payment. I have enclosed a check for the Total Amount Due.

Signature X _____ **Date X** _____

Send completed form and check to: Lockton Affinity
PO Box 874952
Kansas City, MO 64187-4952

1.877.NRA.3006 (1.877.672.3006), option 3
Info@MyNRAInsurance.com

Underwritten by Certain Underwriters at Lloyd's, L

Account #:
Insurance Program Administered by Lockton Affinity, LLC
Not available in New York.