



MDRT

The Premier Association of
Financial Professionals®

COMPANY PROFILE

Form Submission Date: _____

New Company **Update / Information Change**

Company Type _____

(See Page 2 for Definition)

Company Name: _____

Company Headquarters Address: _____

City: _____ State/Province: _____

Postal Code: _____ Country: _____

Parent Company *(if applicable)*: _____

CEO Name: _____

Email: _____

Address: _____

(If different from above)

City: _____ State/Province: _____

Postal Code: _____ Country: _____

COMPANY ADMINISTRATOR *(see Page 2 for Definition)*: **New** **Replacement** _____

Name of previous Company Administrator

Name: _____

Position Title: _____

Email: _____

Address: _____

(If different from above)

City: _____ State/Province: _____

Postal Code: _____ Country: _____

Phone: _____ Ext. _____

SUBMIT COMPLETED FORM TO: Companies@mdrt.org

CERTIFYING OFFICER (see Definitions below): **New** **Replacement** _____

Name of previous Certifying Officer

Name: _____

Position Title: _____

Email: _____

Address: _____

(If different from above)

City: _____

State/Province: _____

Postal Code: _____

Country: _____

Phone: _____

Ext. _____

COMPANY CONTACT (see Definitions below): **New** **Replacement** _____

Name of previous Company Contact

Name: _____

Position Title: _____

Email: _____

Address: _____

(If different from above)

City: _____

State/Province: _____

Postal Code: _____

Country: _____

Phone: _____

Ext. _____

DEFINITION OF TERMS:

INSURANCE COMPANY - *A company that manufactures, underwrites, and/or sells insurance products.*

BROKER DEALER (USA & Canada only) – *A firm that buys and sells securities on its own account or on behalf of its customers.*

GENERAL AGENCY (outside the USA/Canada) – *A company that has a contractual agreement with one or more insurers to sell their insurance products through their direct sales force.*

BANCASSURER – *A bank that sells insurance products through its own distribution channels.*

COMPANY ADMINISTRATOR – *This individual will be able to access the list of all current MDRT members affiliated with their company and submit membership applications on-line.*

CERTIFYING OFFICER – *This individual will be responsible for certifying production data submitted for MDRT membership; can access the list of all current MDRT members affiliated with their company and submit membership applications on-line.*

COMPANY CONTACT – *This individual can access the full list of all current MDRT members affiliated with their company.*

For internal MDRT use only:

_____ GM entered _____ Date Entered

_____ Member Services entered

_____ Date Entered