



**UTICA CLAIMS ASSOCIATION**  
**OVER 50 YEARS OF EDUCATION & EXCELLENCE**

**APPLICATION FOR MEMBERSHIP**

Complete this form and send \$20 membership fee to Kelley Tripple-Belisle, Personal and Confidential, Preferred Mutual Insurance Co., One Preferred Way, New Berlin, NY 13411 or bring to the meeting. Checks Payable to Utica Claims Association.

\_\_\_\_ New Membership \_\_\_\_ Renewal Membership

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Co. Address: \_\_\_\_\_

\_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Please indicate how you would like to receive your meeting notice:

\_\_\_\_ email \_\_\_\_ mail

If you do not indicate a choice for meeting notices and you have listed an email address the meeting notices will be sent to you via email.

Please contact us if you have any questions or concerns.....

**PRESIDENT:** Andrea Thomas, PMSI, 315-525-9171, [andrea.thomas@pmsionline.com](mailto:andrea.thomas@pmsionline.com)

**VICE PRESIDENT:** Chris Kutas, Preferred Mutual, 800-333-7642, ext 1436, [chris.kutas@preferredmutual.com](mailto:chris.kutas@preferredmutual.com)

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**SECRETARY:** Kelley Tripple-Belisle, Preferred Mutual, 800-333-7642, ext 1320, [kelly.tripple-belisle@preferredmutual.com](mailto:kelly.tripple-belisle@preferredmutual.com)