

Royal Neighbors of America • Austin Division 5910 Courtyard Drive, Suite 240 • Austin, TX 78731 Phone: (512) 418-3300 • Toll free: (866) 733-9758 • Fax: (512) 418-3396

PRODUCER CONTRACTING CHECKLIST

Please be sure to <u>SIGN</u> the <u>Producer Contracting Application</u>, <u>Direct Deposit Authorization Agreement</u> (if requested), and the <u>Contract to Represent</u>.

Attach the following forms:	
CONTRACTING	
\square Producer Application (must sign)	
\square Contract to Represent (must sign)	
☐ Commission Addendum	
☐ Direct Deposit Authorization Agreement (must sign if elected) ☐ Voided Check	
☐ Annualization Agreement (must sign if requested)	
LICENSING	
 □ Copy of <u>current</u> Resident Insurance License □ Individual license if contracting as an individual or partnership □ Individual license of the Corporation's Principal (Authorized Officer who signed the Contract to I □ Corporate license if required by the state of charter If you are requesting any Non-Resident appointments: □ Copy of <u>current</u> Non-Resident License(s) □ Non-Resident appointment fees for each requested appointment 	Represent)
Return ALL Forms to your Recruiting Agent	



Royal Neighbors of America • Agent Contracting 5910 Courtyard Drive, Suite 240 • Austin, TX 78731 Fax: (512) 418-3395

PRODUCER CONTRACTING APPLICATION

I.	Personal Information Section (authorized	officer or partner if corporation	n or partnership)			
	First name MI	Last name	Suffix(Jr., III	Social Security no.		
		fessional designation(s) Nickname Driver's license no./State			/	
	☐ Male ☐ Female Date of birth/	/ State of birth	Resident Insurance L	cense no./State	/	
II.	Addresses (mailing address for all correspon	dence and supplies)				
	Send ALL mail (correspondence, commiss		Business ☐ Home			
	Business: Street		Apt./Suite	Telephone no. ()	
	City		-	ZIP		
	W. G.		A (G . :	T. 1	,	
	Home: StreetCity					
	E-mail address	Cell phone no.		FAX		
III.	Partnership Information Section (if appli	icable)				
	☐ Check if commissions are to be paid to	the agency and income repor	ted to the Federal Tax ID no	. below.		
	Agency name			Federal Tax ID n		
	Full name of each general partner			·	,	
	_			icense no./Stateicense no./State		
			Resident hisurance L	cense no./State	/	
IV.	Corporation Information (<i>if applicable</i>) ☐ Check if commissions are to be paid to the corporation and income reported to the Federal Tax ID no. below.					
	Corporation name	-	-			
	Resident Insurance License no./State					
T 7				dent state does not require	a corporate need	nse
V.	Insurance Licenses	anga Liganga(a) shayen ahaya				
	 ☐ I have attached a copy of the Resident Insurance License(s) shown above. ☐ I also wish to be appointed in the following states, and all corresponding non-resident licenses and fees for such licenses are attached. 					
		,,,	resident needses and rees for se	ien neenses are attached.		
X 7 X		,,	,			
VI.	Background Information Have you ever represented, or are you currently	rapraeanting Doyal Naighbors	f America? If "VES" Producer	Code #	□ VES	□ NO
	Have you ever had your insurance license or sec				🗀 TES	ППО
	insurance license denied or revoked by an insurance	1	, ,	1	🗆 YES	□ NO
	Have you ever had a complaint filed against you	u with an insurance department of	or other regulatory agency?			□ NO
	Has any claim ever been made against you, you practices, or have you been refused surety bonds					□ NO
	Are you at present involved in any litigation or	are there any unsatisfied judgme	nts or liens (including tax liens)	against you?	🗆 YES	□ NO
	Do you currently have a pending bankruptcy or	have you declared bankruptcy w	vithin the past seven years?		🗆 YES	□ NO
	Have you pled guilty or nolo contendere to, or b	been found guilty of, a felony or	a crime involving dishonesty or	breach of trust?	□ YES	□ NO
	Does any insurer, insured, or other person claim	any indebtedness from you as a	result of any insurance transact	ions or business?	□ YES	□ NO
	PLEASE EXPLAIN ANY "YES" ANSWER(S))				

Notice of Vector One Report

Royal Neighbors of America is a participant in the Vector One Program. Vector One is a cooperative service which provides member insurance companies information about agent debit account balances.

Fair Credit Reporting Act Disclosure

This notice is provided to you pursuant to 15 U.S.C.A. §1681b(b) of the Fair Credit Reporting Act. Please be advised that Royal Neighbors of America may obtain your consumer report for use in evaluating you as an applicant and prospective producer. A consumer report is any written, oral, or other communication of any information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, previous employment, character, general reputation, personal characteristics, mode of living, criminal records, or education records. Information obtained from a credit reporting agency will not be used for any impermissible purpose or in violation of any federal or state equal protection law or regulation.

By your signature below, you acknowledge that you have received and understand the contents of this notice, and authorize Royal Neighbors of America to obtain your consumer report from any credit reporting agency. You further release any employer, former employer, and each other person from any and all liability of whatever nature by reason of furnishing any of the above information. You recognize that you may be the subject of an investigative consumer report and to the extent permitted by law you waive any requirements of notification with respect to this investigation. You understand that you have the right to request a complete and accurate disclosure regarding the nature and scope of any consumer investigative report prepared on you. You further authorize Royal Neighbors of America to provide any report or information obtained in connection herewith to any other insurance company with whom you request appointment.

 \square Check here if you wish to receive a copy of your consumer report.

Certification of Taxpayer Identification Number

By my signature below and under penalties of perjury, I certify that the number(s) shown on this form is/are the correct taxpayer identification number(s), and I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and I am a U.S. person (including a U.S. resident alien).

Application for General Membership

By my signature below, I am applying for general membership in the Society, Royal Neighbors of America. I support the purposes of the Society and will comply with its laws.

VII	This section must be completed.		
V 11.	•	THODIZATION ACDEEME	NT.
Attach voided check or encoded deposit slip here.		THORIZATION AGREEMEN	
	I hereby authorize Royal Neighbors of America to initiate credit entries made in error to my:	entries and to initiate, if necessar	ry, debit entries and adjustments for credit
	☐ Checking – please enclose a copy of your voided check O	R	
	☐ Savings account – please enclose an encoded deposit slip		
	Provide the information for your direct deposit account and finan	cial institution below:	
	Bank name	Branch	
	Mailing address		
	City	State	ZIP
	Account number	Routing tran	nsit number
	This authority is to remain in full force and effect until terminated	d with written notification by me	».
	Signature		Date
Attac	Printed name		
B _{v/r}	Condition ny signature below, I hereby acknowledge I have read a specimer	as and Agreements	and all applicable supplements and addendums
there	to to be entered into between myself and Royal Neighbors of Arblements, and addendums, a personalized copy of which will be stit business until I have been notified by Royal Neighbors of Amer	merica. I agree to be bound by a subsequently forwarded to me b	ll of the terms and conditions of such contract, by Royal Neighbors of America. I agree not to
by R	present and warrant that all information and answers to questions doyal Neighbors of America must be approved by the Home Office received are provided only for my personal examination of produced only	e prior to their use. I understand	

I further acknowledge that I am familiar with and will adhere to the Royal Neighbors of America Agent's Code of Ethics and that I have been trained

Signature _____
Printed name

and understand Royal Neighbors of America products.



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CONTRACT TO REPRESENT Royal Neighbors of America

This Contract, with attachments, is entered into between You (the agent/agency) and Royal Neighbors of America, a fraternal benefit society whose Home Office is located in Rock Island, Illinois.

Agent/Agency Name (as shown on the resident insurance license)

A. Designation & Appointment

1. Designation

The Agent / Agency named above is herein referred to as You, Your or Agent. Royal Neighbors of America is herein referred to as the Society or It. This contract and all addendums and amendments attached are referred to as "the" or "this" contract, and are entered into between You and the Society in consideration for the mutual agreements set forth herein.

2. Appointment

Upon execution of this contract You are an agent of the Society for the purpose of soliciting applications for the Society's insurance and annuity certificates in states where you are licensed and appointed to sell Royal Neighbors of America Products. This contract does not grant exclusive rights in any territory or for any product. This contract is limited to the types of products offered by Royal Neighbors of America, shown in the Commission Addendum, attached hereto and made a part hereof by reference.

B. General Provisions

1. General

During the continuation of this contract, You agree to:

- (a) Be responsible for the prompt delivery of certificates sent to You in accordance with the Society's rules and instructions.
- (b) Follow all Society bylaws, rules and regulations.
- (c) Solicit only in the state(s) in which You are licensed and appointed with the Society;
- (d) Comply with all State and Federal laws, orders, rules and regulations.

2. Relationship

Nothing contained herein is intended to create the relationship of employer and employee between You and the Society, and You shall at all times be an independent contractor. You shall be free to exercise your own judgment as to the time, place and means of performing all acts hereunder, subject to the rules, regulations and instructions concerning solicitation and delivery of insurance and annuity certificates set forth by the Society or any insurance department.

3. Prompt Remittance

You shall promptly submit any applications for insurance and annuity certificates and any premiums collected by You for the benefit of the Society. Applications and premiums collected should be mailed to the Division Office, whose address is shown on the signature page of this contract. All certificates issued by the Society, must be delivered to the certificateholder within ten (10) days of Your receipt. You shall obtain a signed delivery receipt for the certificate, and return it to the Society. If the health condition of the applicant has changed since the application date, You shall promptly return the certificate to the Society and no issuance or delivery will occur.

4. Limitations

You are not authorized to waive, alter, or change any provision or condition of the Society's insurance or annuity certificates, Contract to Represent, literature, or receipts; modify or extend the amount of time of any premium payment due to the Society, or receive any money due or to become due to the Society except the initial premium. You shall not enter into any contract, incur any expense or obligation of any kind, nor shall you bind the Society to any coverage or risk. No coverage will be effective with respect to any application until approved by the Society. The Society reserves the right, based upon Its sole discretion and without liability to You, to approve or disapprove any application, limit the amount of coverage issued, or charge a higher premium based upon Its evaluation of the risks.

5. Hold Harmless

You agree to defend, at the Society's request and through counsel acceptable to the Society, indemnify and hold the Society harmless from any claims, demands, losses, expenses, costs and damages arising or resulting directly or indirectly from any breach by You of any term or condition of this contract, or violation of any law or regulation or failure to comply with any court order.

You shall not institute any legal proceedings in the Society's name. Should any claims or lawsuits be made by any third party against You or the Society as a result of alleged wrongdoings by You, then You shall hold the Society harmless from, and indemnify It for any claim,

loss, expense, cost, or liability which It may incur defending the action and for any settlement of, or judgment resulting from such action. The Society may, at Its sole discretion, defend or settle any such claim.

C. Compensation, Accounting & Indebtedness

1. Compensation

- (a) You shall be paid compensation according to the terms of this contract, the Commission Addendum and any Annualization Addendum that may be attached. The Commission and / or Annualization Addendums are subject to change by the Society upon notice in writing to You. However, any change shall not affect any certificates issued on applications solicited prior to the effective date of the change.
- (b) Commissions shall not be owed or paid on certificates continued in force under any waiver of premium provision of any certificate, or on collected premiums that are subsequently refunded by the Society. You shall promptly repay the Society any commissions paid prior to the refund.

2. Accounting

- (a) The Society shall provide to You a statement showing compensation and deductions made within the accounting period. Each statement is deemed to be correct and accurate unless You object in writing within thirty (30) days after it has been delivered or posted for review.
- (b) If commissions due to You total less than \$50 in any pay period, then the commission payable will be deferred until accrued commissions exceed \$50.
- (c) All accounting records maintained by You, relating to business conducted with the Society, are subject to inspection at any reasonable time by our authorized representative.

3. Indebtedness

- (a) Any compensation due under this contract may be applied to payment of any indebtedness You may have to the Society. Indebtedness includes any monetary claim the Society may have against you, including but not limited to advances paid, overpayment of commissions, reversal of commissions, the Society's membership fees, and other miscellaneous charges that you have authorized.
- (b) As additional security for the payment of indebtedness under this contract, the Society shall have a first and prior lien against the compensation due You under this contract. The Society's lien is superior to all other liens under this contract. The Society may, at any time, offset any such indebtedness against compensation due You under the contract or any contract You have with the Society. If the Society does elect to offset, the offset shall not constitute an election by the Society to forego any other available remedies to collect the indebtedness.
- (c) You shall reimburse the Society and / or indemnify the Society, for any loss, including attorney's fees, that the Society may incur in recovering from You any indebtedness due the Society.

D. Advertising Guidelines

All representations or references to Royal Neighbors of America, its products or agents, in any advertising or marketing material, shall be submitted to the Society prior to its use or distribution, and shall not be utilized until You receive written approval from an authorized employee of the Society. Advertising includes any material which is designed to create public interest in Royal Neighbors of America, its products or agents. This includes, but is not limited to, consumer material designed to induce the public to purchase, increase, modify, retain, renew, or reinstate a certificate, as well as agent recruiting and training materials. You are responsible for submitting all advertising and marketing material to the Society for approval. Furthermore, You shall maintain a file copy of all such advertising and marketing materials utilized, for a minimum of three years, and provide a copy to the Society upon request.

1. "Agent Use Only" Advertising

All agent directed advertising, training, or recruiting material must display the disclaimer "FOR AGENT USE ONLY" prominently and in bold type.

2. Consumer Directed Advertising

All materials that make reference to Royal Neighbors of America products, directly or indirectly, must include the full Society name and product form number.

3. Contractual Language

Guarantees or promises beyond the guarantee in the certificate are not permitted. Any use of investment type language is not permitted.

E. Termination

If this contract is terminated "without cause" or "with basis", any first year commissions or renewal commissions earned by You shall be fully vested and payable until such commission amounts are less than \$600 in any one calendar year. Servicing fees due in the eleventh (11th) and subsequent certificate years are not vested.

1. Termination "Without Cause"

- (a) At any time, either You or the Society may terminate this contract "without cause" by giving fifteen (15) days written notice, sent to the last known address of the other.
- (b) If You are an individual, this contract shall immediately terminate "without cause" upon Your death.
- (c) If You are a partnership, this contract shall immediately terminate "without cause" upon the death of any partner, unless the surviving partners shall elect by written notice to the Society, within thirty (30) days of the death of the partner, to continue this contract in force and in effect.

- (d) If You are a partnership, this contract shall immediately terminate "without cause" upon the dissolution of the partnership.
- (e) If You are a corporation, this contract shall immediately terminate "without cause" upon Your sale, bankruptcy or insolvency.

2. Termination "With Basis"

Without notice, this contract shall immediately terminate "with basis" if the Society has reasonable cause to believe,

- (a) You have breached any provision of this contract;
- (b) You have willfully failed to obey any rule or procedure set-forth by the Society;
- (c) You have knowingly or intentionally induced or attempted to induce any Society certificateholder to surrender or discontinue paying premiums, where such recommendation is not in the best interest of the certificateholder;
- (d) You have committed any other willful act with the intent to injure the Society in Its public relations;
- (e) You have failed to maintain an active insurance license;
- (f) You have failed to maintain membership in the Society.

3. Termination "With Cause"

Without notice, this contract shall immediately terminate "with cause" if You,

- (a) commit a fraudulent, illegal or dishonest act, which adversely affects the Society, including but not limited to any misrepresentation as to the terms or provisions of an authorized certificate; any alteration, falsification or withholding of information, whether written or oral, about an applicant or prospective insured; any alteration of any application materials; withholding of any required underwriting material;
- (b) violate any insurance law, regulation, or rules of any jurisdiction in which You transact business.
- (c) Personally engage in or cause or permit agents under your control to engage in a pattern or practice of replacing, twisting or rewriting of the Society's life or health certificates. It is understood that the occasional unintentional replacement of a certificate does not constitute a pattern or practice. Any dispute regarding this matter that cannot be resolved by the parties to this agreement will be submitted to arbitration pursuant to paragraph G. 1. of this Agreement

If this contract is terminated "with cause", You shall forfeit to the Society all right, title and interest in any compensation under this contract. Forfeiture under this paragraph shall not constitute an election by the Society to forego any and all other claims or remedies it may have against You.

F. Membership in the Fraternal Society

You are required to maintain membership in the Society, at all times. If You are a corporation, all officers are required to maintain memberships. If You are a limited liability company, all members are required to maintain memberships. If You are a partnership, all general partners are required to maintain membership.

G. Miscellaneous Provisions

1. Arbitration / Governing Law

Any dispute arising between You and the Society shall be governed by and construed and enforced pursuant to the laws of the state of Illinois. In consideration of the execution of this contract, You agree that any dispute arising between You and the Society regarding the terms, the applicability or the enforcement of this contract, which cannot be resolved amicably, shall be first submitted to the American Arbitration Association for binding resolution. The rules of the American Arbitration Association shall govern any dispute under this paragraph. The prevailing party shall be entitled to recovery of reasonable attorney's fees and costs including the cost of the mediation and/or arbitration. The arbitrator shall determine the prevailing parties, the costs and the amount of the attorneys' fees.

2. Supersede & Waiver

This contract supersedes and replaces any contract or agreement previously entered into between You and the Society on behalf of the Society with respect to any future transactions. However, any rights You and the Society have under any previous contract are otherwise unaffected except as expressly provided in this contract. The Society's failure to enforce any provision of this contract shall not constitute a waiver of any other provision of this contract.

3. Assignment & Modification

No assignment of this contract or any compensation due hereunder shall be valid unless in writing and approved, in advance, by the Society. No modification of this contract shall be binding on the Society unless in writing and signed and approved by an authorized officer of the Society.

4. Savings Clause

If any provision of this contract shall be contrary to the laws of the particular state, county, or jurisdiction where used, such contrary provision shall not entirely invalidate this contract, and this contract shall be construed as not containing the particular provision held to be invalid in such state, county, or jurisdiction and the rights and obligations of You and the Society shall be construed and enforced in such a manner as nearly as possible to effect the intent and purposes of the contract.

5. Entire Contract

This contract and all addendums attached herein, which have been approved by the Society, contain the entire agreement between You and the Society. This contract shall become effective only when first executed by You and thereafter accepted by the Society.

6. Copies & Electronic Retention of this Contract

You agree that the Society may retain this contract solely as an imaged or electronic version and may destroy any original signed version of this contract; provided the imaged or electronic version accurately represents this contract including the parties' signatures. You and the Society agree that a facsimile or other electronic reproduction of this contract shall be deemed as valid as the original.

7. Privacy Act Notice

By your signature below You acknowledge you have received a copy of the Privacy Notice, attached to and made a part of this contract. You acknowledge and agree You are acting as a third party service provider to the Society, as contemplated under §503 of the Gramm-Leach-Bliley Privacy Act and are therefore bound by the stated policy of the Society regarding the release of nonpublic information derived by, or for, the Society in Its normal course and conduct of business.

×	Evacuted this	day of		
By: Your Signature (if Corporation, authorized officer)	Executed this	day of	,	
	Accepted this	day of	,	
	By:	By:		
	Royal Neighbors of 5910 Courtyard Dr Austin, Texas 7873 (866) 733-9758			

Royal Neighbors of America believes that serving the needs of our customers with integrity is of utmost importance. All employees and agents are expected to conduct themselves at all times with the highest degree of ethical business practices and in accordance with all state insurance laws and Society regulations.

As a Royal Neighbors of America agent, I agree to:

ч	Adhere to an provisions contained in the Agent's contract.
	Fully comply, at all times, with all laws and regulations regarding the solicitation and sale of any Royal Neighbors of
	America product.
	Make a conscientious effort to ascertain and understand the needs and financial circumstances of my clients, and make
	every effort to render the same quality of service to my clients which, in the same circumstances, I would expect myself.
_	

- Not place the Society under any legal obligation that is not within the scope of my authority.
- □ Not accept risks of any kind, make, modify, or discharge contracts; extend the time for paying the premiums; waive forfeitures or any of the Society's rights or requirements; bind the Society by any statement, promise, or representation; or collect any monies other than as provided in the Contract to Represent.
- Use only appropriate sales materials approved by the Society and include all appropriate disclaimers.
- ☐ Make sure all signatures on applications or other documents submitted by me are authentic.
- Deliver all certificates and contracts to the respective owner in an expedient manner.
- Not enter into any contracts for the solicitation of insurance or annuities or to share commissions with anyone not licensed and under contract with the Society.
- □ Not represent the Society in any manner whatsoever before any state insurance department or official thereof, or any governmental agency, without the knowledge and approval of the Society.



Privacy Notice

Privacy notice to our members

We provide this notice because you have a right to know how we protect the privacy of the personal information you share with us. We welcome the opportunity to describe how Royal Neighbors and our affiliates, which include our chapters, protect your personal information.

What information do we collect?

We collect personal information needed only to service and administer your business with us. The type of information we collect depends on the type of product or service you request. This includes:

- Information you provide on an application or other form (for example, name, address, Social Security number, or income)
- Information from credit reporting agencies and information to verify employment or income
- Information about your past transactions with us
- Medical or health information you permit us to receive from doctors or other health care providers
- Information from our chapters

How do we use and disclose your information?

- We do not sell information about you
- We do not share your information with anyone else for marketing purposes
- We use your personal information only to help transact the business you have with us

We use your information to:

- Underwrite certificates
- Process claims
- Confirm your identity
- Service your certificates with us

Information may be disclosed to other entities that perform services for us related to our transactions with you. This includes underwriting, claims, and member services. Before we disclose your information, these entities must agree to keep it private. Information may be disclosed to entities with whom we have a joint marketing agreement that offer products we believe may be of interest to you, as permitted by law. We may also share information with our affiliates to provide services and products to you.

We may disclose information when it is permitted or required by law.

Examples are:

- To accountants or auditors
- In response to a subpoena
- To our attornevs
- To prevent fraud
- To comply with a request from a regulatory agency

We may receive health information about you. We do not share that health information without your proper written authorization or as permitted or required by law.

How do we protect the security of your information?

Access to personal information is available only to those people who need to know it in order to service your business. This includes our employees and agents who are trained to abide by our privacy policy. We have physical, electronic, and procedural safeguards to ensure privacy of your information.

Should your relationship with us end, we will continue to follow the privacy policies described in this notice to the extent that we retain information about you. If we no longer need to retain that information, we will dispose of it in a secure manner.

Commitment to privacy

We will send our members a current privacy policy at least once a year. We are committed to protecting the privacy of your information. We strive to keep our records accurate and will make appropriate corrections when you notify us. We value the trust that you, as a member of Royal Neighbors, have placed in us.