



North Texas Soccer Fidelity Bond Coverage

To: North Texas Soccer's Member Associations and Clubs

Re: Fidelity Bond

We would all like to think that employees / volunteers would conduct their organization's activities with honesty and integrity. Unfortunately, this is not always the case. According to a U.S. Department of Commerce study, one-third of all employees / volunteers admitted stealing from their employers in the previous year. Employee / Volunteer theft of monetary funds, **such as registration fees**, can have a devastating affect on your organization. Smaller organizations can be especially hard hit by theft and embezzlement, as they cannot afford extensive safeguards nor are large enough to absorb such a financial loss.

Pullen Insurance Services, along with Western Surety, is pleased to offer you an inexpensive but effective way to protect your club from employee / volunteer monetary theft. By purchasing an Employee / Volunteer Dishonesty Bond, you can ensure that your organization is protected. We highly recommend you carefully consider purchasing this insurance. Many times during the year we become aware of situations involving the embezzlement of club funds.

If you are interested in obtaining this coverage, you may complete the enclosed Commercial Blanket Bond application for your club and return it back to us. Please do not hesitate to contact us with your questions. Let us here from you soon.

Sincerely,

Pullen Insurance Services, Inc.





NORTH TEXAS SOCCER

MEMBER ASSOCIATION / CLUB APPLICATION FOR COMMERCIAL BLANKET BOND

Name of Association, League, or Club: _____

Name of Contact Person: _____

Mailing Address for Correspondence: _____

Bus. Phone Number: _____ Home Phone Number: _____

Fax Number: _____ E-mail Address: _____

Has the association/club had any losses in the past (6) years? Yes _____ No _____

If yes, attach detailed explanation on separate page.

Will countersignature of checks be required for amounts exceeding \$1000? Yes _____ No _____

If yes, by whom (name position)? _____

Will audits be done? _____ How often? _____ By Whom? _____

Are bank accounts reconciled by someone not authorized to deposit Yes _____ No _____
or withdraw funds?

Estimate the maximum bank account balance: _____

List the positions to be covered: (President, Treasurer, Secretary, etc.)

(If additional positions need to be covered, please attach separate sheet.)

Effective Date of Bond: _____ Authorized Officer's Signature: _____

Please Circle Requested Limit and Number of Covered Positions

<u>No. of Positions</u>	<u>Amount of Coverage</u>		
	<u>\$25,000</u>	<u>\$50,000</u>	<u>\$100,000</u>
5 or less	\$182	\$241	\$326
6	\$196	\$258	\$347
7	\$209	\$275	\$368
8	\$221	\$292	\$389
9	\$235	\$309	\$410
10	\$248	\$326	\$431

This application is for an Employee (Volunteer) Dishonesty Bond. It is designed to cover losses such as theft or embezzlement of registration fees and association / club funds by your employees / volunteers. The bond will pay up to the amount of coverage. There is no conviction requirement for a loss to be paid nor does a deductible apply to a covered loss.

PULLEN INSURANCE SERVICES, INC. 6300 RIDGLEA PLACE SUITE 614, FT. WORTH, TX 76116

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