



FLORIDA ASSOCIATION OF FIRE RESCUE CADETS

SPECIAL RISK INSURANCE APPLICATION

Policyholder: Florida Fire Chiefs' Association Cadet Program
Policy Number: 9907-51-30
Effective Date: 10/01/2018 to 9/30/19

Application Date:

Cadet Advisor:

Post/Unit #:

Cadet Program Name:

Address:

City, State Zip:

Office Phone:

Cell Phone:

Email:

Number of Cadets	x \$8.00 =	\$	Full Year Premium
AMOUNT DUE			

CHECK # _____ (Payable to Florida Fire Chiefs' Association)

MAIL TO: FFCA • 221 Pinewood Drive • Tallahassee, FL 32303-4837

CREDIT CARD NUMBER:

Expiration Date:

CVV Code:

Name as it appears on card:

Same as above

Card Billing Street Address:

Same as above

Card Billing City, ST & Zip:

Same as above

Email address for receipt:

NOTE:

Chubb Insurance does not require an enrollment form for each Cadet. Chubb issued their policy based on the count of expected Cadets that you provided who are **registered** with the FFCA Cadet program. Your enrollment number may vary slightly during the policy year. We will adjust the premium during the next renewal to account for any minor changes in registration that may have occurred, and set the renewal based on any updated Cadet counts.

The only exception is if, during the policy year, significant influxes of additional Cadets come into the plan (+10%), Chubb will need to know immediately in order to ensure coverage as well as make any premium adjustments midterm on a pro-rata basis.