

INSTRUCTIONS 2010

Follow these simple steps to join FOAM and obtain insurance coverage

PRINT NEATLY - Make information readable for quick processing.

PLEASE see page 2 for important mailing instructions.

Join FOAM

- 1) Fill out FOAM Outfitter or Guide membership application. Do not send in your application without a current, valid license number. "Pending" is not acceptable. You must be licensed to be a FOAM member!
NOTE: New outfitters, check with FOAM office (406-763-5436) or our website for an information form we need to list your website in FOAM's website database to bring in potential clients.
- 2) **Make out a check for appropriate membership dues payable to FOAM.** FOAM dues cannot be pro-rated. If your check does not clear or is not replaced with a good check, your membership - and your insurance - may be cancelled.

Purchase Insurance Coverage

Coverage runs from Jan 1 of current year to Dec 31 of next year. Liability questionnaires received between Jan 1 and Jan 15 will be backdated to Jan 1. Questionnaires received after Jan 15 of current year will NOT be backdated to Jan 1 and coverage will be issued effective the date the questionnaire and payment arrive in the insurance office. Insurance premiums may not be pro-rated; refunds subject to FOAM/agency guidelines.

Liability Insurance

- 1) Include business name (if any), your name, mailing address, phone number, and email address **PRINTED CLEARLY** in case we need to contact you about your coverage. Include your outfitter or guide license number.
- 2) Complete rate section. Basic cost = coverage for one boat or several boats used only one at a time. If you have employees guiding, you must add them as additional employees and pay that premium.
- 4) For optional powerboat or personal boat/gear coverage at additional cost, fill out the Optional Insurance Questionnaire.
- 5) Additional Insureds section: Gov't agencies: Board of Outfitters (outfitters only), FWP/BLM, Bureau of Reclamation, US Forest Service, OR individual businesses or persons you want as additional insured(s) to your policy should be listed with their current address. There is no charge for these entities. Except for the Board of Outfitters, our agent does not automatically issue certificates for additional insureds you may have listed last year. You must update this information each year.
- 6) TOTAL = amount of check to **Bissell Agency**. Check must clear before an insurance certificate can be mailed. Unresolved bad checks will result in cancelled insurance.
- 7) Note the list of activities that are NOT covered by basic liability insurance. Coverage for these activities must be acquired separately.
- 8) **SIGN and DATE your insurance applications. Make insurance check payable to Bissell Agency.**

Motorized Boat Coverage

- 1) Fill out questions as requested. All sections must be completed for coverage.

Optional Boat / Gear Coverage

Equipment Coverage - Standard liability coverage does not include loss or damage to YOUR equipment.

- 1) \$14.50 premium per \$1000 of value/coverage; \$500 deductible.
- 2) Include year, make, model, serial # for each boat and/or trailer
- 3) Provide separate current (not replacement) values for each boat / trailer
- 4) Gear: include values for your oars, rowing frames, life jackets, small gas or electric motors, generators, camping gear, coolers, tables, chairs, rods, reels, tackle, flies, rain gear, misc. fishing equipment, gear bags, clothing, etc.

Commercial Auto Coverage

- 1) Not included under liability coverage. Bissell Agency offers a variety of policies. Call 800-815-6230 and ask for Aurelia Ewan for details. REMEMBER, personal or business auto coverage does NOT cover clients riding in your car or truck.

MAILING Instructions - PLEASE read and follow for quick processing.

- 1) If applying for membership **ONLY** (no insurance), send application and check payable to **FOAM** to:
FOAM
PO Box 67
Gallatin Gateway, MT 59730

- 2) If applying for membership **AND** insurance or, send FOAM membership application & check payable to **FOAM** plus insurance application(s) & check payable to **Bissell Agency** IN SAME ENVELOPE to:

FOAM
PO Box 67
Gallatin Gateway MT 59730

FOAM staff will pull out your FOAM membership application and check, then forward insurance applications and check to Bissell Agency for processing. **REMEMBER**, ONE envelope for the FOAM application and the insurance application(s) and two checks, one for FOAM membership, one for insurance coverage, all mailed to the FOAM address.

- 3) If you're a current FOAM member and wish to have optional insurance or commercial auto coverage after you've applied for and received liability coverage, call the Bissell Agency (800-815-6230), arrange coverage, then send your insurance questionnaire(s) and check to:
Bissell Agency
642 Cottonwood Road, Suite 2
Bozeman MT 58718

If you have questions about FOAM membership or mailing, please call the FOAM offices at (406) 763-5436. For questions about insurance coverage, call Art Hoffart (800-815-6230) or Holly Dyk (800-815-6230, ext. 9).