

# MASSACHUSETTS

## State Licensing Instructions

### Please Type or Print Legible

1. Complete the Application for Club Agent Form. This form has questions 1-7 and your signature.
2. You will NOT complete any information on the Automobile Club Notice of Employment Form.
3. #5 must be completed. Stating N/A is not acceptable. If you had Online Training, you need to state Online Training or you may be more specific.
4. #7 must also be completed and cannot be left blank.
5. You must sign and date the form.
6. You must submit original documents with an original signature. A fax or photocopy is not acceptable.
7. Mail form with the following filing fees:
  - a. Check or Money Order in the amount of \$25.00 for State License
  - b. Make payable to Motor Club of America Enterprises, Inc.

Mail **ORIGINAL** forms together with filing fee to:

Motor Club of America Enterprises, Inc.  
3200 W Wilshire Blvd  
Oklahoma City OK 73116



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**THE COMMONWEALTH OF MASSACHUSETTS**  
**Division of Insurance**

**AUTOMOBILE CLUB**  
**NOTICE OF EMPLOYMENT FORM**  
**AND**  
**APPLICATION FOR CLUB AGENT**

Agent Fee \$25.00

Office of the \_\_\_\_\_ Automobile Club

To the Commissioner of Insurance of Massachusetts:

You are hereby notified that I, \_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Print Official Title)

Of the above named automobile club, I have made an investigation as to the reputation of \_\_\_\_\_ and I am satisfied that the applicant meets the requirements as set forth in Section 10 Chapter 850 of the Acts of 1974. I have accordingly appointed the applicant as an agent to sell automobile club services for the above stated automobile club.

\_\_\_\_\_  
(Signature)

**PLEASE COMPLETE THE NEXT PAGE**

**THIS PORTION TO BE COMPLETED BY THE APPLICANT**

(Please print all answers)

1. Full name of applicant \_\_\_\_\_  
(First Name) (Middle) (Last)

2. Resident Address \_\_\_\_\_  
(No.) (Street) (City or Town)

Business Name and Address \_\_\_\_\_

4. Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

5. Applicants education or training, by the club or other qualification in the field of automobile contracts and the laws of the Commonwealth of Massachusetts pertaining to automobile clubs.

6. I hereby verify my foregoing statements and answers and declare under the penalties of perjury that they are correct.

7. Executed at \_\_\_\_\_  
(City) (State)

This \_\_\_\_\_ Day of \_\_\_\_\_

(Applicant's Signature)

Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Federal I.D. # \_\_\_\_\_

Home Tel. # (\_\_\_\_) \_\_\_\_\_

Business Tel. # (\_\_\_\_) \_\_\_\_\_