

MISSOURI RURAL SERVICES WORKERS' COMPENSATION INSURANCE TRUST

Sponsored by Missouri Rural Services Corp.
1913 Southridge Dr., P.O. Box 104268, Jefferson City, MO 65110 Telephone: (800) 726-9304

MEMBERSHIP AGREEMENT

It is agreed that _____
is a member of the Missouri Rural Services Corp. and entitled to all benefits afforded by
the Corporation.

The Membership is for the period _____ to _____

Payment of the Membership fee on or before the expiration date will automatically renew
this agreement for twelve months.

Membership Benefits include:

Annual Membership Fee \$ _____ Prorated Fee \$ _____.

This Agreement is approved the _____ day of _____, _____.

Authorized Representative from Entity

Signature of Authorized Representative from Entity