



— MDP PROGRAMS —

Workers Compensation Application

General Information					
First Named Insured					
Mailing Address		City		State	Zip
Contact Person		Phone:		Fax:	
Web Address		Contact's E-Mail Address:			
Effective Date		Federal Tax I.D. #		Years in Business:	
Description of Operations:					

Workers Compensation

Classification	Annual Payroll
8810 – Clerical Staff	
9154 – Theatrical Staff – Other (stage crew, management, sound, etc.)	
9156 – Theatrical Performer, Musician, Dancer, etc.	
Other Classification	
Officers/Owners to be Included/Excluded:	
Name/Title and Payroll	
Number of Full-Time Staff:	
Number of Part-Time Staff:	

Contacts for Questions/Completed Applications:

Meghan Coleman
 410-547-3183
 info@artsinsuranceprogram.com