Statement of Intent to Join TCA Insurance Collaborative

## [[MUNICIPALITY LETTERHEAD/LOGO]]

September \_\_\_, 2023

Theresa Kuhns Chief Executive Officer Maryland Municipal League 47 State Circle, Suite 403 Annapolis, MD 21401

Re: Time to Care Act Insurance Collaborative

Dear Ms. Kuhns:

The undersigned, a duly authorized official of [[municipality name]], hereby confirms that [[municipality]] intends to join the Time to Care Act Insurance Collaborative in accordance with the attached Memorandum of Agreement, and that the undersigned has recommended to [[municipality's governing board]] that the [[municipality]] so join the Collaborative.

[[ENTITY NAME]]

By: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Municipality: \_\_\_\_\_

Membership Fee, non-refundable (due by October 15, 2023) (payment details to be provided upon receipt of the statement of intent)

Fewer than 200 employees \$3,000 200 to 499 employees \$5,000 500 to 999 employees \$7,500 1,000 to 1,999 employees \$10,000 2,000 or more employees \$12,500