



Markel Insurance Company

**New York City ~ Limit Selection Form**  
**(Brooklyn, Bronx, Manhattan, Queens, and Staten Island)**

Maximum Number of Children in your care at any one time:	Annual Premium w/ Liability Limits of \$1,000,000 per occurrence \$3,000,000 aggregate *	Annual Premium w/Liability Limits of \$100,000 per occurrence \$300,000 aggregate *
1	\$785	\$517
2	\$791	\$523
3	\$797	\$529
4	\$803	\$535
5	\$809	\$541
6	\$814	\$546
7	\$1,142	\$756
8	\$1,148	\$762
9	\$1,154	\$768
10	\$1,160	\$774
11	\$1,166	\$780
12	\$1,172	\$786
13	\$1,562	\$1,030
14	\$1,568	\$1,036
15	\$1,574	\$1,042
16	\$1,579	\$1,047
17	\$1,585	\$1,053
18	\$1,591	\$1,059

**\*Premium includes \$20,000 Accident Medical Expense Benefit, \$10,000 Accidental Death & Dismemberment and \$60 membership fee.**

New and Renewing Family Child Care Insurance Applicants:

- ✓ Complete and Sign Insurance Application

Return Signed Application with:

- ✓ Copy of your State Child Care License/Registration
- ✓ Premium based on the limits you choose & the number of children in your care.
- ✓ *Make check for the full payment payable to:*  
CHILD, Inc. ~ P.O. Box 222 ~ Weatogue, CT 06089

Limits Chosen (please check the appropriate box):

- \$1,000,000 per occurrence/\$3,000,000 aggregate
- \$100,000 per occurrence/\$300,000 aggregate

Name of Applicant \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_