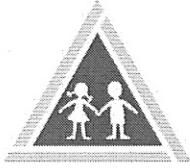


Exhibit A



RESOLUTION TO JOIN

THE NEW JERSEY SCHOOLS INSURANCE GROUP ERIC NORTH 2015-2018

WHEREAS, N.J.S.A. 18A:18B-1, *et seq.*, enables school districts to cooperate with each other to make the most efficient use of their powers and resources on a basis of mutual advantage in the areas of insurance and self-insurance and related services; and

WHEREAS, the Board of Education of the Montgomery Township Board of Ed District desires to secure protection, services, and savings relating to insurance and self-insurance for itself and its departments and employees; and

WHEREAS, the Board of Education of the Montgomery Township Board of Ed District finds that the best and most efficient way of securing this protection and services is by cooperating with other school districts across the State of New Jersey;

WHEREAS, the Board of Education of the Montgomery Township Board of Ed under its obligations as a member of the New Jersey Schools Insurance Group does allow for safety inspections of its properties, to pay contributions in a timely fashion and to comply with the bylaws and standards of participation of this Group.

NOW THEREFORE BE IT RESOLVED BY THE BOARD OF EDUCATION OF THE Montgomery Township Board of Ed DISTRICT:

THAT the Board of Education of Montgomery Township Board of Ed joins with other school districts in organizing and becoming members of the New Jersey Schools Insurance Group; and

THAT, by adoption and signing of this resolution, the Board of Education is hereby joining the New Jersey Schools Insurance Group in accordance with the terms of the attached Indemnity and Trust Agreement, effective the date indicated below, for the following types of insurance:

Property <input type="checkbox"/>	EDP <input type="checkbox"/>	General Liability <input type="checkbox"/>	Umbrella/Excess <input type="checkbox"/>
Equip Breakdown <input type="checkbox"/>	Crime/Bonds <input type="checkbox"/>	Automobile Liability <input type="checkbox"/>	Errors Omissions <input checked="" type="checkbox"/>
Auto Physical Damage <input type="checkbox"/>	Workers' Compensation <input checked="" type="checkbox"/>		

Adopted by the Board of Education of the _____ District, New

Jersey, this _____ day of _____ 20____ for a _____ year term.

ATTEST

Print Name and Title

6759613v2



William M. Mayo, Executive Director
New Jersey Schools Insurance Group