

National Association of Mortgage Brokers



Application for Commercial Membership

(Licensed or registered residential brokers and loan officers are not eligible.)

Member Information – All Fields must be completed.

Individual Name (Mr./Mrs./Ms.): _____

Company Name: _____ Job Title: _____

Phone: _____ Fax: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Home Address*: _____

City: _____ State: _____ Zip: _____

Referred By: _____

*Home address is to determine congressional district. This information is strictly for legislative purposes.

Please select one:

I authorize ___ NAMB, _____ my State Affiliate, or _____ both to send legislative and other updates via business fax, phone, email, and mail regarding association business.

Payment:

Please make checks payable to NAMB or pay by credit card.

Charter Member (Join by December 31, 2008) - \$400 (renew at \$400 for 2009 and 2010)

Join after December 31, 2008, - \$750 (renew at \$750)

VISA/MC/AMEX # _____ Expiration: _____

Name on Credit Card: _____

Signature of Cardholder: _____ Date: _____

Note: Membership dues are not deductible as a charitable contribution. A portion of your dues may be deducted as an ordinary business expense for federal tax purposes. Please consult your accountant.

Certification:

___ Yes ___ No I pledge to conduct my business in accordance with the laws, rules, and regulations of the federal government, and in accordance with the Code of Ethics, Best Business Practices, Bylaws, and Board Policies and Procedures of the National Association of Mortgage Brokers and its State Affiliates as applicable. Furthermore, I agree to hold harmless NAMB and its State Affiliates, directors, officers, committee members, employees, or members collectively and individually for any decision rendered or action taken in the furtherance of the interest of the association.

I understand that failure to do so may result in the termination of my membership without refund.

I hereby confirm that I have not been convicted of a crime in any jurisdiction involving a felony or which involves fraud, dishonest dealing or any other act of moral turpitude. I authorize NAMB to renew my membership annually at the rates listed above. I certify that all statements made in this application are true and correct and that any false statements concerning the information above may be grounds for rejection of this application or termination of my membership if approval is granted and contradictory information is subsequently discovered.

Authorized Signature _____ **Date:** _____

Please mail or fax application to:

NAMB, Attn: Membership, 7900 Westpark Drive, Suite T 309, McLean, VA 22102
Fax (703) 342-5905