



Administration Offices:
P. O. Box 1069
Carlsbad, CA 92018-1069
(619) 633-4EIC (4342)

APPLICATION FOR Associate Membership

Please Type

Name of Applicant Business

Type of Business of Applicant

Principal Business Address

PHONE: () Fax: ()

E-mail: Website:

NAME, BUSINESS ADDRESS AND POSITION OF OFFICER WHO WILL REPRESENT COMPANY AT MEETINGS. The representative may be changed at any time by notification of change, submitted in writing, to the Secretary of the Escrow Institute of California.

NAME BUSINESS ADDRESS POSITION HELD

ADDITIONAL PARTICIPANTS

If you wish to have additional persons attend meetings and receive publications and mailings, provide their names and addresses below. In addition to dues shown below, extra fees of \$100 per person annually should be enclosed with this application.

Name of Individual

Mailing Address

Telephone

(If more than one additional participant, please provide a separate list of names and addresses)

In accordance with Article II, Section 7 of the Bylaws of the Escrow Institute of California, "All those proposed for membership shall be sponsored by a member in good standing and shall apply as a Company or Corporation whose business is allied to the escrow industry."

Name/Affiliation of Sponsor

GIVE THREE (3) BUSINESS REFERENCES:

Table with 4 columns: COMPANY NAME, ADDRESS, INDIVIDUAL, TELEPHONE

This application is to be accompanied by a check for dues which are \$700.00 a year on a calendar basis. A company joining after January will have its dues prorated to the end of the year. Dues may be paid annually by January 31st or in two (2) equal payments: First payment due January 31st; Second payment due April 1st. Any dues remaining unpaid more than 30 days are considered delinquent.

Multiple branch companies may receive additional mailings, publications, and be included on the website upon payment of an extra \$50.00 per branch location. Please attach a list providing names, addresses, phone /fax numbers, and e-mails of the branch locations.

I certify that the above information related to our business is factual and correct.

Dated Signature

By Chief Executive Officer (Please Type Name)