



ARIZONA TRUSTEE ASSOCIATION, INC.

Name \_\_\_\_\_

Membership Application and Invoice – 2010

Company \_\_\_\_\_

I do hereby apply for membership in the Arizona Trustee Association, Inc.. If accepted, I agree to be governed by the Association's Bylaws and Canon of Ethics. I am aware that all references to "Trustee" or "Trustee Functions" within this Application mean Trustees handling the Deed of Trust foreclosure functions within the state of Arizona.

Membership Fees - Active Members \$150.00; Renewal after 01/31/10 \$200.00

Membership Fees - Affiliate Members \$100.00; Renewal after 01/31/10 \$150.00

The Arizona Trustee Association has two categories of members: Active and Affiliate. Please select the category that best describes your business.

ACTIVE MEMBERS: (Voting)

- Person(s) working directly in a Trustee function, or a manager or supervisor of same. Explain how the firm qualifies as Trustee:
A firm acting as Trustee. Explain how the firm qualifies as Trustee:
Attorney regularly acting in the capacity of Trustee or regularly representing Trustees with respect to Trustee matters.
Officer or firm engaged in the business of issuing Trustee Sale Guarantees.
Officer or firm acting as support and/or agent for the Trustee. Explain:

AFFILIATE MEMBERS: (Non-voting)

- Person or firm engaged in the practice of law.
Person or firm acting as a lender.
Person/firm engaged in the business of investing in Real Estate.
Real Estate Broker or Agent.
Other, explain:

Sub-Category of Membership: Please check a box from column 1 AND column 2:

- 1. Corporate / Firm Membership
Individual Membership
2. New Membership
Renewal Membership

DIRECTORY INFORMATION – Please fill this area out completely. The information provided will be published in the Membership Directory and/or in our newsletter, "The Trustee Times."

(Applicant)

First Name: MI: Last Name:

Name of Company:

Mailing Address:

City: State: Zip Code:

Business Telephone Number: Business fax number:

e-mail address (to be published): Website:

The undersigned, by signing this Application, certifies that all information provided herein regarding qualifications for membership are true and accurate.

Signature of Applicant

Date

Please continue to page 2

TURN OVER TO BACK SIDE FOR MEMBERSHIP FEES & DIRECTIONS



Arizona Trustee Association, Inc.  
Membership Application – 2010

**Membership Fees**



Category of Fees	<input checked="" type="checkbox"/> Please Check as appropriate	Fees or Expenses	Before 01/31/10	After 01/31/10
Membership	<input type="checkbox"/>	Active Member	<b>\$150.00</b>	\$200.00
	<input type="checkbox"/>	Affiliate Member	<b>\$100.00</b>	\$150.00
Directory Advertising	<input type="checkbox"/>	Business Card \$55.00	\$	\$
	<input type="checkbox"/>	1/4 Page \$75.00	\$	\$
	<input type="checkbox"/>	1/2 Page \$150.00	\$	\$
	<input type="checkbox"/>	Full Page \$200.00	\$	\$
Legislative Sponsorships	<input type="checkbox"/>	<b>Voluntary</b> Donation for Legislation Expenses Minimum \$25 requested	\$	\$
	<input type="checkbox"/>	<b>Bronze Sponsorship</b> - \$50 (receives a complimentary Business Card ad in the "Trustee Times")	\$	
	<input type="checkbox"/>	<b>Silver Sponsorship</b> - \$150 (receives a complimentary 1/4 Page ad in the "Trustee Times")	\$	
	<input type="checkbox"/>	<b>Gold Sponsorship</b> - \$250 (receives a complimentary 1/2 page ad in the "Trustee Times")	\$	
	<input type="checkbox"/>	<b>Platinum Sponsorship</b> - \$350+ (receives a complimentary Full Page ad in the "Trustee Times")	\$	
<b>Total Amount Enclosed</b>			\$	\$

**COMMITTEES** – I am interested in joining the following committee(s):

- Membership   
 Convention   
 Education   
 Newsletter   
 Legislative   
 Website

**REFERRALS** – Please contact the following person / company to see if they may have an interest in joining the ATA:

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

**IMPORTANT!!!** In an effort to get the Membership Directory out in a timely manner, any membership applications received after February 26, 2010 may not be included in the Directory.

Send the completed application along with your check payable to:

**ARIZONA TRUSTEE ASSOCIATION, P.O. BOX 17071, PHOENIX, AZ 85011-7071**

If you have any questions, please contact **Brenda Melroy-Tucson at 480-214-4527 / Brenda.Melroy@fnf.com**

**\*\*\*Please note for tax purposes: For the year 2009, 0.00% of your membership dues is allocable to lobbying efforts and is therefore not deductible.**

For ATA Membership use only

**Payment Received:** Amount \$ \_\_\_\_\_ Check number \_\_\_\_\_ Date \_\_\_\_\_

**Board Approval:**  Member  Affiliate Member By: \_\_\_\_\_ Date: \_\_\_\_\_