



Membership Application and Invoice – 2009

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 01/31/09 \$200.00

Membership Fees - Affiliate Members \$100.00; Renewal after 01/31/09 \$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... A firm acting as Trustee... Attorney regularly acting... Officer or firm engaged in the business of issuing Trustee Sale Guarantees... Officer or firm acting as support and/or agent for the Trustee.

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:

e-mail address (for ATA internal use only):

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

Signature of Applicant

Date



Arizona Trustee Association, Inc.  
**Membership Application – 2009**

### Membership Fees

Category of Fees	<input checked="" type="checkbox"/> Please Check as appropriate	Fees or Expenses	Before 01/31/09	After 01/31/09
Membership	<input type="checkbox"/>	Active Member	\$150.00	\$200.00
	<input type="checkbox"/>	Affiliate Member	\$100.00	\$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 / PR       Convention       Education       Newsletter       Legislative

**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 15, 2009 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 **Paul Rhodes** at (602) 414-0017

**\*\*\*Please note for tax purposes: For the year 2008, 84.5% of your membership dues is allocable to lobbying efforts and is therefore not deductible.**

For ATA Membership use only

**Board Approval:**     Member                       Affiliate Member

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