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#### NATIONAL ASSOCIATION OF SURETY BOND PRODUCERS

7735 Old Georgetown Road, Suite 900

Bethesda, MD 20814 Tel: 240.200.1270 Fax: 240.200.1295

www.nasbp.org

### **NASBP** Associate Application Checklist

Associate Application □
Membership Affidavit □
Home Office & Branch Office Contacts Form □
Associate Dues Check □

Send application materials to:

National Association of Surety Bond Producers
Membership Department
7735 Old Georgetown Road, Suite 900
Bethesda, MD 20814
Phone: (240) 200-1282 Fax: (240) 200-1295



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#### **ASSOCIATES APPLICATION**

Home Office Location:	
<b>Address 1:</b> □ Preferred Mailing Address	<b>Address 2:</b> □ Preferred Mailing Addre
Street	Street or PO Box
City State Zip	City State Zip
Telephone: ()	Website:
Full Name:	
Full Name:	Professional Designations:
Full Name:  Title: Phone No.:	Professional Designations:
Title:	Professional Designations:
Full Name:	Professional Designations:Fax No.:
Full Name:  Title:  Phone No.:  E-mail Address:	Professional Designations: Fax No.:
Full Name:  Title: Phone No.: E-mail Address: Preferred Salutation: ~ Mr. ~ Mrs. ~ Ms.	Professional Designations: Fax No.:

Do you affirm that your firm is committed to the mission of NASBP to strengthen professionalism, expertise, and innovation in surety and to advocate its use worldwide? YES  $^{\sim}$  NO

I UNDERSTAND AND AGREE that the National Association of Surety Bond Producers has the right to verify any of the information I have provided in this associate membership application, and that the Association may use the information provided in this application to determine my firm's eligibility for associate membership in the National Association of Surety Bond Producers

I UNDERSTAND FURTHER that completion of this application for associate membership in the National Association of Surety Bond Producers does not imply or assure the acceptance of my firm as an associate of the Association. I also understand that compliance with the Bylaws, submission of the Membership Affidavit, and remittance of dues are conditions to and of associate membership.

NOTE: SUBMISSION INFORMATION (please return the following documents)

<ul> <li>Completed signed and dated Application</li> </ul>
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- Completed Home Office & Branch Office Contacts Form
- Completed signed and dated Membership Affidavit

•	<b>Associate</b>	Fees	Chec

Firm Name	Si	gnature of Principal
By:		
Principal's Name (Print)	Title	Date

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#### MEMBERSHIP AFFIDAVIT

A principal or officer of each applicant for membership must read, sign and date this affidavit and return it to the NASBP Membership Department along with other completed application materials.

#### I HEREBY AFFIRM THAT:

- (a) I am an officer or principal of my firm and I possess the authority to make this Affidavit; and
- (b) No current officer, owner, partner, manager, director or managing director of the firm has been charged with and duly convicted of a felony involving theft, conversion or fraud, including consumer, wire or mail fraud, in the performance of surety business or other business endeavors.

Firm Name:		
Signature:	Date:	
Print Name/Title:		

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## NASBP INDIVIDUAL MASTERFILE QUESTIONNAIRE

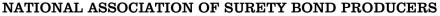
Please make copies of this form before completing and return one form to NASBP for each individual that you wish to add to your membership roster.

Full Name:					
Title:					
<b>Professional Designation</b>	n:				
E-mail Address:					
Salutation:	Mr.	Mrs.	Ms.		
Date of Birth:/ (Optional)	/				
Are you the Key Contac	et for NASBP	?		YES	NO
Are you the Government for grass roots ac and regulatory n If not, please provide NAS	ctivities on leg natters impac	gislative ting surety?	ons Contact:	YES	NO
Full Name:					
E-mail Address:					
Add your name to NAS	BP mailing lis	st?		YES	NO
Add your name to the fi membership dire	0	n NASBP		YES	NO
Preferred nickname for	NASBP mee	ting badges: _			
Spouse's name for NAS	BP meeting b	adges:			
Home Address:					
Home Phone:	_				

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## ASSOCIATE DUES PRICE STRUCTURE THIS IS NOT AN INVOICE

NASBP associate membership dues are based on the total number of firms listed as NASBP associates ending December 31, 20\_. NASBP bylaws stipulate that every associate office, whether the headquarters of a firm or a participating division, branch office or subsidiary, shall each pay a membership investment to the Association based on the following schedule:

#### ASSOCIATE DUES PRICE STRUCTURE/ 1-5 OFFICES

	20 DUES
Home Office	\$1,378
Each office listed under headquarter	\$574