



INTERN MEMBERSHIP APPLICATION

In accordance with the Bylaws of the California Escrow Association: Article II, Section 1, B - Membership, 4, Intern Membership:

"An intern membership may be granted one (1) time for a period not to exceed two (2) consecutive years, and will be available to an individual who participates in the escrow or settlement process as a secretary, assistant, or any other position that is clerical and/or entry level. This class of membership is not available to previous CEA members, an escrow officer, or any person in a management or supervisory position; it provides no voting rights in the California Escrow Association and no membership in the American Escrow Association. The annual dues to the California Escrow Association for this class of membership will be established pursuant to the Standing Rules."

Intern Membership through \_\_\_\_\_ Regional Association of the California Escrow Association. Recommended by: \_\_\_\_\_

Member Name: \_\_\_\_\_ SS#: \_\_\_\_\_
Last First MI

BUSINESS ADDRESS HOME ADDRESS

Company: \_\_\_\_\_ Address: \_\_\_\_\_
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_
Phone: (\_\_\_\_) \_\_\_\_\_ Ext: \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_
Fax: (\_\_\_\_) \_\_\_\_\_

For mailing purposes please use: (Check One) \_\_\_\_\_ Home Address \_\_\_\_\_ Business Address

EMPLOYMENT INFORMATION

Position/Title: \_\_\_\_\_

Employment Category: \_\_\_\_\_ Title Company \_\_\_\_\_ Savings and Loan \_\_\_\_\_ Bank \_\_\_\_\_ Broker Escrow
\_\_\_\_\_ Licensed Escrow \_\_\_\_\_ Other

It is understood the term of membership shall be for the calendar year \_\_\_\_\_ for which a check in the sum of \$ \_\_\_\_\_, payable to \_\_\_\_\_ is attached to this application.
Regional Association

In the event false information is submitted on this form, it shall constitute grounds for denial of membership; or in event membership is granted, shall constitute grounds for termination of membership. The Board of Directors had the right to take any action they deem appropriate.

In making this application, I agree to abide by the Bylaws of the above-named Regional Association and the California Escrow Association. I hereby certify the statements made herein to be true and accurate.

Contributions or gifts (including membership dues) to California Escrow Association are not tax deductible as charitable contributions. Pursuant to the Federal Revenue Reconciliation Act of 1993, association members may not deduct as ordinary and necessary business expenses, that portion of association dues dedicated to direct lobbying activities. Based upon the calculation required by the law, 8% of the State dues payment only should be treated as nondeductible by CEA members. Please consult your tax advisor for tax credit/deduction information.

By signature below, the undersigned acknowledges that membership shall be in accordance with the definitions of Intern Membership as set out in this application.

MEMBER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

When completed, return form and payment to: \_\_\_\_\_

FOR REGIONAL USE ONLY
By: \_\_\_\_\_ Region No. \_\_\_\_\_ Date \_\_\_\_\_