



# Power of Membership

# MEMBERSHIP APPLICATION

Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip +4: \_\_\_\_\_  
 Day Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 Annual Gross Closings: \$ \_\_\_\_\_ Referred by: \_\_\_\_\_

**PLEASE LIST ALL LICENSES HELD:**

License No.	Regulator/Issuer (i.e., DRE, NMLS, etc.)
_____	_____
_____	_____
_____	_____
_____	_____

**Has your license or that of an affiliated company ever been suspended or revoked or have there been any complaints within the last ten years? If yes, please provide details:**

\_\_\_\_\_  
\_\_\_\_\_

**Tell us about your professional work history:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Tell us about your current company history and business focus, branches, employees, and other pertinent details:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**How did you become aware of CMA?**

\_\_\_\_\_  
\_\_\_\_\_

**Do you know other CMA members? If yes, who?**

\_\_\_\_\_  
\_\_\_\_\_

**PROFESSIONAL REFERENCES**

Name _____	License Number (if a licensee) _____
Firm Name _____	
Relationship _____	
Phone _____	E-mail _____

Name _____	License Number (if a licensee) _____
Firm Name _____	
Relationship _____	
Phone _____	E-mail _____

Name _____	License Number (if a licensee) _____
Firm Name _____	
Relationship _____	
Phone _____	E-mail _____

**Mission Statement**

The California Mortgage Association is committed to providing legislative advocacy, legal resources and education programs for our members to enhance their professionalism. We believe that the public good is served when professionals serve the public.

**Regular Member**

Any reputable individual, sole proprietorship, corporation, limited liability company, or partnership primarily engaged in the Mortgage Business in the state of California.

**Affiliate Member**

Any reputable individual, sole proprietorship, corporation, limited liability company or partnership who regularly provides services or products to persons engaged in the Mortgage Business.

**Educational Member**

Any reputable individual, sole proprietorship, corporation, limited liability company or partnership engaged in the Mortgage Business who is not subject to the provisions of Business & Professions Code § 10232(a)-(b) ("threshold broker"), or under any successor statute.

**In which CMA Committee or Committees are you interested?**

- Membership  Dodd-Frank  *Points of Interest Magazine*  Advertising/Vendor  Education  
 Continuing Education  Legislative  Other

**I would be interested in participating in the following focus group:**

- Commercial:** For those members whose interest is commercial finance. While we meet as a whole, we have organized into two chapters – Northern and Southern California. Select the location where you do the most lending.  
 Northern CA  Southern CA
- Securities:** For those members who are using "non-DRE" methods of raising capital for your loan investments or would like to learn more about securities like pools and permits.
- Consumer:** For those members who are arranging owner-occupied 1-4 unit loans, want to stay up-to-date on the laws and invent new possibilities in this lending arena.

I hereby make application for membership in the California Mortgage Association and pledge myself, if accepted, to abide by the requirements of their By-Laws and Code of Ethics as they are now and as they may be amended. Applicant acknowledges that the use of the Association logo is exclusive to members only, and applicant agrees to cease utilizing the logo upon termination of membership. By becoming a member, applicant authorizes CMA to send information on products and services by phone, fax or e-mail under U.S.C. 47 sec. 227. Applicant certifies that the foregoing information and annual gross closings are correct.

Signature (required) \_\_\_\_\_

**DUES PAYMENT OPTIONS: Dues are based on your annual gross closings. Please select one:**

- Regular Member** — (\$1 million and above per year): \$125/month  
 **Affiliate Member** — Billed Annually (No voting privileges): \$500/year  
 **Educational Member** — (Open to non-threshold and sales individuals. No voting privileges): \$75/month

**MAKE CHECKS PAYABLE TO: CALIFORNIA MORTGAGE ASSOCIATION**

**Credit Card Authorization:**  VISA  MasterCard

Card Number: \_\_\_\_\_ 3-4 Digit CVV: \_\_\_\_\_ Expiration: \_\_\_\_\_

Amount to Charge: \$ \_\_\_\_\_ Cardholder's Name: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

Billing Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip +4: \_\_\_\_\_

CMA offers a convenient automatic payment plan for your membership. Dues will be charged to your credit card on the 1<sup>st</sup> of each month. The first month's payment or annual dues payment is required to activate your CMA Membership. By signing below you authorize the California Mortgage Association to initiate credit card charge(s) to remain in full effect until written notification from you is received by CMA, in accordance with the terms and conditions contained herein.

Monthly Payment: \$ \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Contributions or gifts (including membership dues) to CMA are not tax deductible as charitable contributions. Pursuant to the Federal 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 law, 18% of the dues payment only should be treated as non-deductible by CMA members. Check with your tax advisor for tax credit/deduction information.**

**Mail Application with Payment to:**

2520 Venture Oaks Way, Suite 150 • Sacramento, CA 95833

If paying by credit card, you may fax to: (916) 924-7323 • Questions? Call (916) 239-4080 or visit [www.californiamortgageassociation.com](http://www.californiamortgageassociation.com)