

**ALLIANCE OF FINANCIAL
AFMP
MARKETING PROFESSIONALS**

**Application to Alliance of Financial Marketing Professionals – 2008
PLEASE CHECK ONE:**

- 1) I AM A CURRENT MEMBER RENEWING MEMBERSHIP
2) I AM A NEW MEMBER REFERRED BY: _____

Information on this application will be used to update our membership roster. Please fill in completely, including professional designations if applicable. Please forward any change in address or company affiliation to the current Membership Chairman as soon as possible.

Date: _____

Name _____ Nickname _____

Title _____

Company Name _____

Company Address _____

Business Phone _____ Fax _____

Home Address _____

Home Phone _____ Email _____

Spouse Name _____

Statement Regarding Membership (check one)

REGULAR MEMBER: I am personally responsible in recruiting, training and development within the financial services industry

ASSOCIATE MEMBER: I am affiliated with a financial services organization

As an AFMP member, you may desire to assist the organization with an additional sponsorship contribution:

Legacy Contribution \$100 _____

Return Application with \$120.00 Annual dues payable to AFMP

Lynette Owens, Executive Director

AFMP – Alliance of Financial Marketing Professionals

P. O. Box 5005 #55

Rancho Santa Fe, CA 92067

Phone:(858) 759-0510 Mobile: (619) 540-3636 Fax: (858) 759-9194

Email: lynette@theafmp.com