

AACM MEMBERSHIP ASSOCIATE MEMBER



Complete entire application. Type or print legibly as your information should appear on all AACM sources.

Associate Name : _____

Company or Association Name : _____

Address : _____

City : _____ State : _____ Zip Code : _____

Email : _____ Phone : _____

Website : _____ Cell : _____

Individual Member Details

Individual Member : _____

Association Name : _____

As the Individual Member, you assume all financial responsibility for the Associate listed on this application.

Initial : _____

As the Individual Member, you authorize this application to be accepted & enroll in AACM's education program to obtain their CAAM/CAASP Certification.

Initial : _____

_____	_____	_____
Individual Member Signature	Title	Date

If accounting contact is different than Individual Member please list below.

Accounting Contact: _____

E-Mail : _____ Phone : _____

Associate Membership Information

- Must complete and return, you must also comply with AACM Code of Ethics and Membership Standards. (Separate Documents)
- Participate in the AACM Education Program to obtain and maintain their CAAM/CAASP certification.
- Member and their support staff may attend all AACM events.
- Do not have voting rights.
- Are not allowed to hold an AACM Board position

Individual Members will be included on the website and in the AACM directory. Managers interested in enrolling their staff in AACM's Education Program, please contact the AACM office.

AACM MEMBERSHIP ASSOCIATE MEMBER



Application Continued

ASSOCIATE MEMBER DUES – PLEASE READ

Associate Member Levels

Associate included in Individual On-Site Application

Dues are included in the Individual On-Site Levels

Associate - Dues \$250

If adding an Associate outside of New or Renewing Individual On-Site Member.

Please Note:

As an Associate Member to an Individual member, you are eligible to enrollment into our education program & you will be obtaining a CAAM/CAASP designation.

Applicant's signature verifies the accuracy of this application, acknowledges that Applicant has read and agrees to the terms stated within this application, and authorizes AACM to conduct any background review it deems necessary to verify all items stated in this application.

Associate Member Signature

Title

Date

Membership Statistics - Confidential to AACM

AACM maintains accumulative data on all Members for use in our legislative/lobbying efforts. This information is used by AACM to show our strength at the Capitol. Your company information will only be used collectively and is confidential. This information is a requirement of membership within AACM. *This information is NOT used to determine your membership level information.*

Number of AZ Associations Managed	:	<input type="text"/>	Number of AZ Dwelling Units Managed	:	<input type="text"/>
Number of AZ Employees	:	<input type="text"/>	Number of AZ Community Managers	:	<input type="text"/>
Number of AZ Support Staff	:	<input type="text"/>	Number of CAAM Certified Managers	:	<input type="text"/>
Number of CAASP Certified Staff	:	<input type="text"/>			

Criminal, Civil & Disciplinary Actions

Please answer the questions below. The questions seek information about the following persons: (a) the applicant, (b) any person who owns more than 20% of the equity of, or otherwise controls, the applicant, or (c) any person who is a director, executive officer, or supervising manager of the applicant. Together, these are referred below as an "associated person". If you answer "yes" to any of the questions, please provide an attached detailed explanation.

Yes No

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Within the past ten (10) years, have you or any associated person been convicted or plead guilty or no contest, in criminal legal proceedings involving a felony? |
| <input type="checkbox"/> | <input type="checkbox"/> | Within the past five (5) years, have you or any associated person been involved in civil legal proceedings in which there was a final decision by a court concluding that you or any associated person were responsible for misrepresentation, dishonesty, fraud, violations of fiduciary duty, misappropriation of funds or property, or other serious misconduct? |
| <input type="checkbox"/> | <input type="checkbox"/> | Within the past five (5) years, have you or any associated person been refused bonding, fidelity or crime insurance, or had any such coverage canceled or suspended? |
| <input type="checkbox"/> | <input type="checkbox"/> | Within the past five (5) years, have you or any associated person had any professional license or certification suspended or revoked? |
| <input type="checkbox"/> | <input type="checkbox"/> | Within the past five (5) years, have you or any associated person been subject to disciplinary action by any licensing or regulatory agency or any industry association? |

AACM MEMBERSHIP ASSOCIATE MEMBER



Application Continued

ASSOCIATE MEMBER DUES – PLEASE READ

Acknowledgement

Applicant has submitted this application to AACM with the understanding that :

1. AACM will use the information provided in judging the Applicant's eligibility for membership.
2. Applicant will promptly provide any additional information that AACM requests.
3. Applicant is at least 18 years of age.
4. The information provided is complete and correct to the best of the applicant's knowledge.
5. AACM will use reasonable efforts to keep the information confidential, except as may be required to process and review the application or if AACM is ordered by an authority having jurisdiction (such as a court, arbitrator or government regulator) to disclose the information.
6. Applicant has truthfully answered all questions contained in the application and has accurately disclosed all information requested in, or relevant to, the application.
7. Applicant subscribes to and agrees to comply with the AACM Code of Professional Ethics and Standards of Practice (available for review at www.aacm.com).
8. Applicant accepts and acknowledges Applicant's responsibility to comply with all AACM financial obligations and AACM Membership Standards (available for review at www.aacm.com).
9. Applicant will provide AACM with Applicant's current place of business and will promptly notify AACM of any change thereto.
10. Applicant consents to any investigation AACM deems necessary as part of its evaluation for this application. Applicant consents to AACM's completion of criminal background checks, civil litigation searches, credit report and credit score reviews, third-party interviews and other information gathering related to applicant or any associated person (the "background reviews"), to the extent AACM deems such background reviews necessary or appropriate. Applicant acknowledges that AACM may carry out background reviews either when objective information in the application raises questions or on a random basis.
11. Applicant releases any claim Applicant might otherwise have against AACM or any third party arising out of any information or comment furnished to AACM in connection with this application or any background review. All information supplied by third parties will be deemed privileged and will not establish a basis for any action by the Applicant for slander, libel, defamation of character or any other damage and Applicant specifically releases all such claims.
12. Applicant waives any and all claims against AACM, its officers, directors, employees, agents, attorneys, committees and members arising out of any act or omission in connection with the consideration, rejection or acceptance of this application, the completion of any background reviews, or any act or omission by AACM in disappointing the Applicant if the application is not approved, including any suspension or revocation of Applicant's membership in AACM.
13. Applicant agrees that AACM will be solely responsible for accepting or rejecting this application and that the decision of AACM's Board of Directors with respect to the Application is final and not subject to any appeal. Applicant further agrees that AACM will be solely responsible for deciding any other matters or sanctions arising in connection with this application and that the decision of AACM's Board of Directors with respect to such matters is also final and not subject to appeal.

ASSOCIATE MEMBER CONTRACT – PLEASE READ

Management Company Membership in AACM is recorded in the name of the organization, not the individual. To be eligible as a Management Company Member, the company's portfolio must primarily consist of HOA communities. If the company has a varied portfolio, the Designated Member must work within the HOA division. In addition, the company must have at least one HOA community under contract. Membership dues are non-refundable. Approval of new Member applications will not be finalized until dues are received. Membership will renew automatically unless terminated in writing. Dues quoted are effective 12/01/2022 and are subject to change. Delinquencies over 60 days will result in your membership being suspended until paid current. In the event your account is transferred to collections you can be held responsible for all collection fees. We are required to advise you that your association dues are not deductible as charitable contributions for Federal Income Tax purposes. Political contributions are not deductible. Please be advised that 90% of your dues, which represent that portion used to monitor and influence legislation for 2022, are non-deductible for business purposes. We suggest you contact your tax advisor for specific guidance. Any use of the name Arizona Association of Community Managers, AACM, AACM logo, CAAM or CAASP designations or any implied association with AACM after non-renewal or termination of membership is strictly prohibited. By signing below, you agree that you are able to make binding decisions on behalf of the above-named company, have read and agree to this contract, and that your company is in good standing with AACM's Membership Standards – Section 4.00.

Individual Member Signature

Title

Date

1575 W. University Dr. Suite 105 Tempe, AZ 85281

(602) 685-1111 | aacm.com | membership@aacm.com