NEAMA
NEW ENGLAND ADJUSTMENT MANAGERS ASSOCIATION

Date: _____

NEW MEMBERSHIP APPLICATION

☐ Associate Member ☐ Member
$500 for initial membership (Vendors)
$300 for Annual Membership (Banks and Credit Unions)

Organization Name: _____

Mailing Address: _____

Organization Representative:_____

Organization's Main Telephone number: _____

Email: _____

Type of Business: _____

NEAMA Sponsor: _____

What prompted you to join NEAMA? _____

Signature: _____

By signing above, you agree to adhere to the By-Laws of New England Adjustments Managers Association, which are posted on our website (www.neama.org).

Please attach a copy of your current sales brochure listing the products and services your company can offer to our members. Please provide a copy of the representative's business card.

Checks payable to **NEAMA** can be mailed along with this form to:

NEW ENGLAND ADJUSTMENT MANAGERS ASSOCIATION
C/O Home Loan Bank, ATTN: Karen Stirling
One Home Loan Plaza
Warwick, RI 02886

Contact Drew Courtemanche 508-865-7617 or Karen Stirling 401-773-9601 to discuss prepaid Vendor Sponsorship Options.

Executive Committee Vote Approval:_____Date: _____