



## Associate Member 2022 Application

*Please type or print legibly as your information should appear on all AACM sources*

Associate Name: \_\_\_\_\_ Title: \_\_\_\_\_

Association Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

### Associate Member Categories:

Dues are based on a calendar year. Dues are non-refundable. Dues are prorated semi-annually for new Individual Members joining July-December. Approval for applications will not be finalized until dues are received.

**Please check the box indicating your membership type:**

*\*\*\* Annual cost is \$250 unless covered under On-Site or Individual Member. \*\*\**

- 1) On-site Associate (Association Employee)
- 2) HOA Coordinator (Developer Employee)
- 3) CAASP certification maintenance but not currently in community management

Associate Members:

- Must sign and comply with AACM Code of Ethics and Membership Standards (*Separate Documents*)
- Participate in the AACM Education Program to obtain and maintain their CAASP certification at the Member price
- Assist may attend all AACM events
- Do not have voting rights
- Are not allowed to hold an AACM Board position

*\*\*\* As an Associate Member to an On-Site/Individual member, your enrollment into our education program is approved & you will be obtaining a CAASP designation. \*\*\**

## Individual Member & Association Details

**Individual CAAM Member (you work for):** \_\_\_\_\_

**Association Name:** \_\_\_\_\_

You authorize this individual to take education classes to obtain their CAASP and are aware of being financially responsible for the cost if the Associate does not pay. **Initial:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Invoicing Contact Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Individual CAAM Member Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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## Criminal, Civil and 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**

- 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?
- 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?
- 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?
- Within the past five (5) years, have you or any associated person had any professional license or certification suspended or revoked?
- 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?

**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](http://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](http://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.

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

**ASSOCIATE MEMBER CONTRACT – PLEASE READ**

Associate Membership in AACM is recorded in the name of the individual, not the organization. Membership dues are non-refundable. Approval for new applications will not be finalized until dues are received. Membership will renew automatically unless terminated in writing. Dues quoted are for current year 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 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, 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.**

**Associate Member Signature:** \_\_\_\_\_ **Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_