

Silicon Valley Association for Financial Professionals

MEMBERSHIP APPLICATION

For the period July 1, 2017 through December 31, 2017

Please fill out the following for each member joining. Each person must complete a separate application.

Membership Type (Check ONE): INDIVIDUAL CORPORATE (purchased by the Primary Attendee on behalf of the employer)

Name _____

Title _____

Company _____

Email _____

Phone _____

CCM/CPT: Yes No AFP member: Yes No

Each **Individual Membership** belongs to an individual. **IT CANNOT BE TRANSFERRED TO ANOTHER PERSON OR ENTITY IF THE NAMED INDIVIDUAL IS UNABLE TO ATTEND A FUNCTION.**

Each **Corporate Membership** is issued under the name of a designated company. This **MEMBERSHIP IS TRANSFERABLE BETWEEN REGULAR EMPLOYEES OF THE NAMED COMPANY (excludes others working for that company who do not receive a W-2 from the company)**. With a Corporate Membership, only one employee of the Company may attend each meeting, unless guest fees are paid for other attending employees. Each Corporate Membership will have one **Primary Attendee** who shall be the member permitted to vote on matters brought to the membership and who is eligible to serve on the Board of the SVAFP. The designation of voting member cannot be changed during the course of the fiscal year unless the designated voting member ceases to be employed by the company.

TERMS AND CONDITIONS OF MEMBERSHIP shall be as set forth in the Bylaws of the organization. No refund shall be made on any dues. Membership may be terminated and a member expelled from the organization for the following offenses:

- Failure to pay dues within 60 days of invoice date;
- Receiving complaints by other members about the member's offensive behavior;
- Solicitation of business during meetings or other events held by the SVAFP;
- Inappropriate use of SVAFP mailing lists or membership rosters;
- Disruptive behavior during meetings or other events held by the SVAFP.

Notwithstanding the above, membership of any person may be terminated without cause by a majority vote of the current Board of Directors.

LIABILITY DISCLAIMER: By signing below, I hereby hold harmless the officers, promoters, lessees and lessors of the Silicon Valley Association for Financial Professionals (SVAFP) for any loss or injury to myself or others or my property or the property of others which may occur due to my voluntary participation in SVAFP events.

Signed,

Date: _____