

*NOTE: Please fill in and return this form with your payment.*

## Member Information

Membership Type  Corporate (*primary representative:* \_\_\_\_\_)

(check one):  Individual

Applicant's Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Asset Size: \_\_\_\_\_

Street/P.O. Box Address: \_\_\_\_\_

City, State, ZIP Code: \_\_\_\_\_

Work Phone No.: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Job Title/Function: \_\_\_\_\_

Compliance Certifications: \_\_\_\_\_

Primary Regulator: \_\_\_\_\_

## MEMBERSHIP DEFINITIONS & DUES

- ❖ Each financial institution or industry-related service organization may have one Corporate Membership with one person designated as the primary representative. This person holds voting privileges on any DACA business. All employees of the Corporate Member may attend meetings at the member price.
- ❖ Individual Members also have voting rights and pay the member rate for meetings. Individual Members must be Compliance Professionals at a financial institution or industry-related service organization.
- ❖ Corporate Membership Annual Dues: \$315 USD, Individual Membership Annual Dues: \$135 USD

---

### REMITTANCE DETAILS – IF NOT APPLYING AND PAYING ONLINE

1. Please make check payable to: **DALLAS AREA COMPLIANCE ASSOCIATION**
2. Mail **Membership Application** and **Check** to: **Cindy Maxwell-Bathea**  
**Interbank**  
**5307 E. Mockingbird Ln., Ste. 350**  
**Dallas, TX 75206**

Total enclosed: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_