CALIFORNIA ESCROW TION ***** MEMBERSHIP APPLICATION 2025

Membership	INDIVIDUAL	AFFILIATE	STATE ONLY		SUPPORT STAFF	INACTIVE		
(Annual Fee)	(\$315)	(\$315)	(\$	315)	(\$140)	(\$14	· · · · · · ·	
Definition:	Practicing or non-active escrow professional.	In allied fields, non-escrow.	row. Practicing escrow professional.		Assistant / Secretary / Clerical / Entry Level.	Individual Active members or State Individual Active members who have been members for the past 5 years and no longer engaged in their profession, either permanently or temporarily.		
	·				Limit 2 years.	Temporarily is defined as working 90 days or less per year.		
Who:	Current active and non-active escrow professional, regional membership required	Individuals in allied fields not engaged in the practice of escrow. Provides a service or product that supports the escrow profession.	professional or non-active wa		New to the profession and wanting to start their career out on the right foot	Inactive members shall be those who have been active members for the past five (5) years as Individual Active members or State Individual Active members who are no longer engaged in their profession, either permanently or temporarily. Temporarily is defined as working 90 days or less per year. May not hold office but can serve on committees.		
Includes Memberships:								
Regional					✓	✓		
CEA	✓	✓		✓	✓	✓	<i>(</i>	
AEA	✓	✓						
		Voting Privileges: ✓						
Regional	✓	✓		1				
CEA	✓	,		✓				
AEA	✓	✓						
Name:	Name: Title: Referred by:							
Employment Cate	Employment Category (check one):							
☐ I would like to opt out of having my information included on the CEA website.								
Membership is based on a calendar year, on an individual basis, and is non-transferable.								
Business Address (■ Preferred address) Home Address (■ Preferred address)								
Company Name				Address				
Address				City / State / Zip				
City / State / Zip				Phone Fax				
Phone Fax				Mobile Phone				
E-mail E-mail								
For categories other than State Only, please choose a primary regional membership using the CEA map. If no region, please select State. Region: State (no region)								
In making this application, I certify that the above is true and correct and I agree to abide by the Bylaws of the above-named Regional Association and the California Escrow Association contributions. Pursuant to the Federal Revenue or 30% (all others) of the State Dues payments.								
and the American Escrow Association, if appropriate. Reconciliation Act of 1993, association members only should be treated as nondeductible by Cl may not deduct as ordinary and necessary members. Please consult your tax advisor for to								
Signature						redit/deduction informati		
Payment (Do not e-mail credit card information. If you are paying by credit card, there is a \$10 fee.)								
Amount: \$ ☐ Enclosed is check # (Payable to California Escrow Association) ☐ Company ☐ Personal								
☐ AMEX ☐ MasterCard ☐ Visa Last 4 digits of card: Name on Card:								
Billing Address: Signature:								
Full Credit Card#						Fyn:	∴ Λ/#·	