Escrow Association of Washington, Inc.

New Member ____ Renewal _____

2017-2018 Membership Application

(Effective October 1, 2017 to September 30, 2018)

The Escrow Association of Washington promotes ethics and professionalism for all members by providing quality education, monitoring State legislative and regulatory activity, and communicating regularly with members regarding issues that impact their practice. Your dues include membership in your Regional Association, EAW, and the American Escrow Association (unless otherwise noted below). The American Escrow Association (AEA) will keep you informed about National Legislative and Regulatory issues.

Online renewal is quick and easy! Go to www.e-a-w.org, complete the application and pay securely with your credit card.
To pay by check, complete and return this form with payment to EAW, 1002 N Meridian Ste 100 PMB 189, Puyallup, WA 98371.

Questions? Contact us at akerstner@advocal.com or (800) 446-9121.

Name _____
Company _____
Address _____
City, State, Zip _____
Email _____
Telephone ( ) _____

Escrow Officer _____
Limited Practice Officer _____
LPO No. _____
Legislative Dist. No. _____

Additional member from same company:
Name _____
Email _____
Telephone ( ) _____

Escrow Officer _____
Limited Practice Officer _____
LPO No. _____
Legislative Dist. No. _____

Select Regional Association:

____**Eastern Washington** ____**Eastside** ____**Greater Seattle** ____**North Puget Sound** ____**Peninsula** ____**South Sound**

Select Membership Type:

____**Individual Membership**—full membership, all voting rights, AEA membership included Fee: $190.00

____**Provisional Membership**—new members, first year only, AEA membership not included Fee: $100.00

____**Escrow Assistant Membership**—escrow assistant or secretary, non-voting membership, AEA membership not included Fee: $ 75.00

____**Affiliate Membership**—escrow business or related business, one contact person per company, non-voting membership, AEA membership not included Fee: $300.00

Company Contact: _____ Email: _____

Dues payment enclosed $_____

In making this application, I agree to abide by the Bylaws, Standing Rules, and Code of Ethics of the Regional Association, the Escrow Association of Washington, and the American Escrow Association.

Signed: _____ Date: _____

Legislative Fund: EAW employs a lobbyist in Olympia to monitor regulatory and legislative issues that may impact your practice. You can help retain this valuable service with your donation to the EAW Legislative Fund.

Please accept this donation to the Legislative Fund, and acknowledge me on your website. $_____

(___Check here if you prefer not to be named on our website)