



The Trade Association for Financial Service Centers in Illinois

**VENDOR APPLICATION FOR ASSOCIATE MEMBERSHIP**

(Please Print or Type)

Date \_\_\_\_\_

Contact Person \_\_\_\_\_

Company Name \_\_\_\_\_  
(Include INC., CORP., LTD.)

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Type of Business/Service \_\_\_\_\_

Web Address \_\_\_\_\_

In making this application, I hereby waive all claims against the Association, its officers, directors, employees, agencies and any and all members, arising out of any act in connection, rejection or acceptance of this application.

I hereby agree that if I am admitted to associate membership in the Community Currency Exchange Association of Illinois, Inc., I will keep in strict confidence any information relating to the Association, its management and its members.

\_\_\_\_\_  
Signature of Sponsor  
(Must be signed by a C.C.E.A. member in good standing)

\_\_\_\_\_  
Signature of Applicant

**Membership fee of \$500.00 for the initial two-year period.**

**Annual membership fee is \$250.00 per year following initial period.**

January 11, 2012