

## Mortgage Bankers Association of Kentucky Application for Membership

Organization	Corporate _	Individual	Date Organized
Name of individu	al to receive mai	lings and invoices	Mail E-mail
rvame of marviae	an to receive mar	migs and myorees	
Address			
City		State	Zip Code
Telephone		Fax	E-mail
	Classi	fication of Membe	rship
\$25.00 for each legeographic location the following  At Large Co Any firm or corporate of the following of the following the servicing agents to the following the following the following agents to the following the f	ocal member from on that is not servitwo categories:  orporate Member oration, doing but hich make loans for institutional in	r Initiation Fee \$25 siness throughout the C secured by real estate, envestors, and has been	Commonwealth, including its or mortgage correspondents, or in business a minimum of six
	_		iation as a regular member. An ions of the State or Local
•		ut the Commonwealth.	
A firm, corporation of the Commonwealth and Affiliate Member	and has been in both is permitted to a	hat provides mortgage usiness for a minimum	00 Annual Dues \$350.00 services throughout the of six (6) months. Ab At-Large ions of the State or Local
Type of Busines	s (please check o	one):	
Mortgage l		Mortgage Broke	¥ •
Real Estate	e Agent	Inspector	Attorney
Appraiser		Builder	Insurance Agent
	Organization	Savings Bank	Credit Union
Housing A	gency	Commercial Bar	nker



Which sector of the real esta	te finance industry do you p	orimarily serve?
Residential	Commercial	Both
Retail	Wholesale	Both
If a lender, what type of mor	tgages do vou offer:	
Conventional	FHA	VA
KHC	RHS	Commercial
Reverse Mortgages	2 <sup>nd</sup> Mortgages	Construction
understand there is a charge	of \$75.00 per chapter. By sinotification list, receive morpate in committees. Please s	ne Bluegrass
I certify that all the data provundersigned hereby applies faffirms that the applicant org conformity with the purposes	or membership in the Morts anization is in accord with	gage Bankers Association and and conducts business in
Signature (required)	Title	Phone No.
Printed Name	Date	

\*\* By signing the application for membership in the Mortgage Bankers Association, you consent for you and your company's employees to receive e-mail, faxes and direct mail related to MBA membership, events, products and services. Please attach a list of employees and contact information for anyone you which to receive notices.



Please send the completed application and dues to: Pam Thompson Membership Chairman Mortgage Bankers Association of Kentucky c/o Commonwealth Bank and Trust 4912 US Highway 42, Suite 202 Louisville KY 40222

Your membership will be voted upon at the board of Directors meeting following receipt. We appreciate you consideration and participation.

Executive Board Approval:_	 Date