

TEXAS LAND TITLE ASSOCIATION

# ASSOCIATE MEMBERSHIP APPLICATION



Company Name: \_\_\_\_\_

Office Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Main Phone: \_\_\_\_\_ Website: \_\_\_\_\_

Email for General Inquiries: \_\_\_\_\_

Type of Business: \_\_\_\_\_

## MAIN/ PRIMARY CONTACT

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Job Title: \_\_\_\_\_

## DUES CONTACT

*if different than main contact*

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Job Title: \_\_\_\_\_

## DIRECTORY CONTACT

*if different than main contact*

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Job Title: \_\_\_\_\_

If a member of TLTA recruited your company for membership, please provide their name and company:  
\_\_\_\_\_

**Annual Dues are \$425 and are due with the application.** You will be notified of your full membership following approval by the TLTA Board of Directors but you may begin enjoying the benefits of TLTA Associate Membership once your application and dues are received.

## PAYMENT INFO:

Payment by check should be payable to :

Texas Land Title Association, 1717 W. 6th St. Suite 120, Austin, TX 78703

MasterCard     VISA     AMEX     Discover

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

*Applicant certifies to the association that the information contained herein is true to the best of his/her knowledge and belief.*

Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_