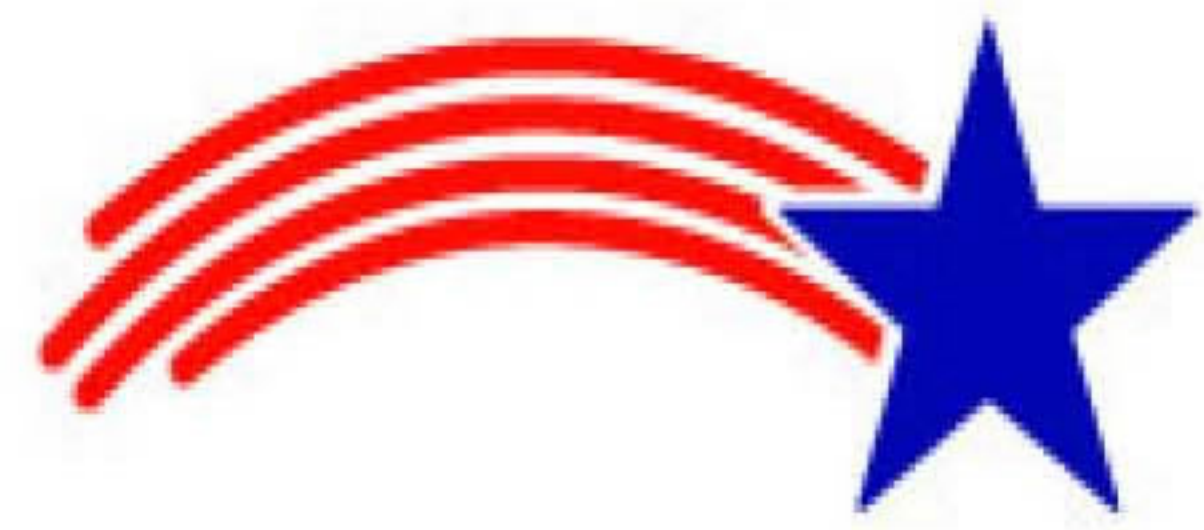


West Texas / New Mexico Customs Brokers Association  
 dba El Paso Area Customs Brokers Association  
 P.O. Box 17959  
 El Paso, Texas 79917



**WEST TEXAS NEW MEXICO  
 CUSTOMS BROKERS ASSOCIATION**

**Application for Membership**

<b>Firm's Name:</b>	
<b>Address:</b>	
<b>City, State, Zip</b>	
<b>Telephone No:</b>	
<b>Fax No.:</b>	
<b>Name of Chief Executive</b>	
<b>Title</b>	
<b>Email Address:</b>	
<b>Primary Contact:</b>	
<b>Title:</b>	
<b>Direct No.:</b>	
<b>Email:</b>	
<b>Secondary Contact</b>	
<b>Title:</b>	
<b>Direct No.:</b>	
<b>Email:</b>	

*Requesting membership in the West Texas / New Mexico Customs Brokers Association Inc, on behalf of said firm named above as a:*

- Regular** \_\_\_\_\_ **Regular Member:** A company engaged for hire by the public to transact Customs business on their behalf.
- Associate** \_\_\_\_\_ **Associate Member:** A company that employs an in-house Licensed Customs Broker for the District / Port of EL Paso, Texas.
- Affiliate** \_\_\_\_\_ **Affiliate Member:** A company that engages in forwarding, transportation, and the like, but not transacting as a Customs Broker for hire or having a Licensed Customs Broker on staff.

**Customs Broker License No.** \_\_\_\_\_

*(A copy of license will be required when applying for a Regular Membership.)*

*I agree to observe and uphold the bylaws and Code of Ethics of the Association, if elected as member.*

Enclosed is Check # \_\_\_\_\_ in the amount of     \$400.00     for first year's dues.

**Name / Title:** \_\_\_\_\_  
**Signature:** \_\_\_\_\_  
**Date:** \_\_\_\_\_

-----Below for WTNMCBA Use Only-----

**Date Received** \_\_\_\_\_  
**Approved / Rejected Date** \_\_\_\_\_