

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



# Application for Membership

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

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.

<b>Customs Broker License No.</b>	
(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 \_\_\_\_\_ \$350.00 \_\_\_\_\_ for first year's dues.

<b>Name / Title:</b>	
<b>Signature:</b>	
<b>Date:</b>	

-----Below for WTNMCBA Use Only-----	
<b>Date Received</b>	
<b>Approved / Rejected Date</b>	