

# MEMBERSHIP APPLICATION

## CAAMP

- Represents Canada's mortgage industry
- Supports professional excellence through the Accredited Mortgage Professional (AMP) designation
- Publishes a variety of industry publications covering in depth news and information
- Delivers comprehensive professional development courses
- Provides timely and relevant industry research



# MEMBER SERVICES

For  
additional  
information  
visit



[www.caamp.org](http://www.caamp.org)

## Professional Accreditation

Accredited Mortgage Professional (AMP) - Canada's national designation for mortgage professionals, supported by extensive advertising (*available to members only*)

## Client Reach

Connecting members with mortgage consumers through a variety of channels

## Professional Development

Regional symposiums, national mortgage conference, educational seminars and networking events (*members receive reduced registration fees*)

## A Voice with Government and Regulators

Representing members' interests and providing updates on relevant legislative and regulatory changes

## Errors and Omissions Insurance (E & O)

The premier E & O insurance policy for mortgage brokers

## Resources

Providing timely industry statistics, publications and research reports

## Benefits Program

Discounts on a variety of products and services



# DECLARATION

## INDIVIDUAL DECLARATION

- Yes  No Have you ever been charged with, convicted of or pardoned of a criminal offence?
- Yes  No Are there any civil judgments or actions against you or has judgment ever been entered against you in an action involving fraud? If so, attach a copy of the judgment or action.
- Yes  No Have you ever been disciplined, suspended or expelled as a member of any professional organization?
- Yes  No Have you ever been denied a license or permit, or had any license or permit revoked, for failure to meet good character requirements?
- Yes  No Are you currently subject to a petition or assignment in bankruptcy or a proposal to creditors under the Bankruptcy and Insolvency Act, or have you ever been bankrupt or insolvent, under any statute?

**If you answered yes to any of the above questions, please provide full details on a separate sheet.**

I agree to abide by any best practices or professional standards of CAAMP that may be in place from time to time. I agree to abide by the CAAMP Bylaws, including its Code of Ethics ("Code") set out therein, and the policies of CAAMP in place from time to time, and acknowledge having received and read a copy of the current CAAMP Bylaw. I understand and agree that, if accused of a violation of the Code, I will be subject to the CAAMP ethics process and penalties, which may include publication of my name.

I declare that the statements made herein are for the purpose of qualifying as a member of CAAMP and are true and correct. I understand and acknowledge that the statements made herein are being relied upon by CAAMP, in its sole discretion, to approve my application for membership in CAAMP. I hereby authorize CAAMP to make all inquiries necessary to verify the accuracy of statements made herein and consent to the collection, use and disclosure of any of my personal information that CAAMP deems relevant in order to approve my application for membership. I authorize my employer to pay the initial membership fee, all applicable renewal membership fees for me and to provide information updates on me to CAAMP. CAAMP reserves the right in its sole discretion to require the membership applicant to provide a criminal record check upon written request.

Date \_\_\_\_\_ Applicant Signature \_\_\_\_\_

## EMPLOYER DECLARATION

I agree that to the best of my knowledge and belief the answers provided by the above-referenced member to the questions set out in this application are true and correct. I agree to pay the initial membership fees for the above-referenced member, all future renewal membership fees for the duration of his or her tenure with this company and provide CAAMP with information updates on this member.

Date \_\_\_\_\_ Employer Signature \_\_\_\_\_

Print Name \_\_\_\_\_ Title \_\_\_\_\_

**Membership is subject to board approval. CAAMP will not process incomplete applications.  
Your payment must be included with this application in order for it to be processed.**

**I am interested in applying for the AMP designation. Please have someone contact me.**