

MEMBERSHIP APPLICATION 2025

Membership (Annual Fee)	INDIVIDUAL (\$315)	AFFILIATE (\$315)	STATE ONLY (\$315)	SUPPORT STAFF (\$140)	INACTIVE (\$140)
Definition:	Practicing or non-active escrow professional.	In allied fields, non-escrow.	Practicing escrow professional.	Assistant / Secretary / Clerical / Entry Level. Limit 2 years.	Individual Active members or State Individual Active members who have been members for the past 5 years and no longer engaged in their profession, either permanently or temporarily. Temporarily is defined as working 90 days or less per year.
Who:	Current active and non-active escrow professional, regional membership required	Individuals in allied fields not engaged in the practice of escrow. Provides a service or product that supports the escrow profession.	Current practicing escrow professional or non-active escrow professional. No regional membership.	New to the profession and wanting to start their career out on the right foot	Inactive members shall be those who have been active members for the past five (5) years as Individual Active members or State Individual Active members who are no longer engaged in their profession, either permanently or temporarily. Temporarily is defined as working 90 days or less per year. May not hold office but can serve on committees.
Includes Memberships:					
Regional	✓	✓		✓	✓
CEA	✓	✓	✓	✓	✓
AEA	✓	✓			
Voting Privileges:					
Regional	✓	✓			
CEA	✓		✓		
AEA	✓	✓			

Name: _____ Title: _____ Referred by: _____

Employment Category (check one): ☐ TC – Title Company ☐ S/L/B – Savings & Loan or Bank
☐ BE – Broker Escrow ☐ LE – Licensed Escrow ☐ OT – Other

☐ I would like to opt out of having my information included on the CEA website.

Referred by: _____

Membership is based on individual anniversary date, and is non-transferable. _____

Business Address (■ Preferred address)

Home Address (■ Preferred address)

Company Name _____

Address _____

Address _____

City / State / Zip _____

City / State / Zip _____

Phone _____ Fax _____

Phone _____ Fax _____

Mobile Phone _____

E-mail _____

E-mail _____

For categories other than State Only, please choose a primary regional membership using the CEA map.

If no region, please select State. ☐ Region: _____ ☐ State (no region)

In making this application, I certify that the above is true and correct and I agree to abide by the Bylaws of the above-named Regional Association and the California Escrow Association and the American Escrow Association, if appropriate.

Signature _____

Date _____

Contributions or gifts (including membership dues) to the CEA are not tax deductible as charitable contributions. Pursuant to the Federal Revenue Reconciliation Act of 1993, association members may not deduct as ordinary and necessary business expenses, that portion of association

dues dedicated to direct lobbying activities. Based upon the calculation required by law, 22% (Intern) or 30% (all others) of the State Dues payment only should be treated as nondeductible by CEA members. Please consult your tax advisor for tax credit/deduction information.

Payment (Do not e-mail credit card information. If you are paying by credit card, there is a \$10 fee.)

Amount: \$ _____ ☐ Enclosed is check # _____ (Payable to California Escrow Association) ☐ Company ☐ Personal

☐ AMEX ☐ MasterCard ☐ Visa Last 4 digits of card: _____ Name on Card: _____

Billing Address: _____ Signature: _____

Full Credit Card# _____ Exp: _____ CV#: _____

Return completed form and payment by mail or fax to: California Escrow Association, P.O. Box 2582 • Granite Bay, CA 95746

For more information, contact us at: (916) 239-4075 – phone • (916) 791-0355 – fax • www.ceaescrow.org