

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



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

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 _____ \$350.00 _____ for first year's dues.

Name / Title:

Signature:

Date:

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

Date Received

Approved / Rejected Date