

# MAPIA 2014

## MEMBERSHIP APPLICATION

Name \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

**2014 Dues Amount** (please check one):

\_\_\_\_\_ For Companies with 1-2 active Public Adjusters      \$1,000

\_\_\_\_\_ For Companies with 3-6 active Public Adjusters      \$2,500

\_\_\_\_\_ For Companies with 7 or more active Public Adjusters      \$5,000

Enclosed is my check for \$ \_\_\_\_\_

( ) Please charge my credit card for the full amount of the dues.

( ) Please charge my credit card for 12 equal installments on a monthly basis:

\$1,000 = \$83.33 per month for 12 months

\$2,500 = 208.33 per month for 12 months

\$5,000 = 416.66 per month for 12 months

Cardholder Name \_\_\_\_\_

( ) MasterCard    ( ) American Express    ( ) Visa    ( ) Discover

Credit Card # \_\_\_\_\_

Credit Card Billing Address \_\_\_\_\_

Signature \_\_\_\_\_

Expiration Date \_\_\_\_\_

### PLEASE MAIL TO:

MAPIA Headquarters  
414 River View Plaza  
Trenton, NJ 08611

### OR FAX TO:

MAPIA Headquarters  
(609) 393-9891

### QUESTIONS?

Please contact Joseph DeSanctis at  
(609) 393-7799 or via email at  
jdesanctis@njpsi.com