



# Association of Contingency Planners

## INDIVIDUAL MEMBERSHIP APPLICATION

### CONTACT INFORMATION (please print):

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Title: \_\_\_\_\_ Organization: \_\_\_\_\_  
 E-mail Address (required): \_\_\_\_\_ Alternate E-mail: \_\_\_\_\_  
 Address 1: \_\_\_\_\_ Address 2: \_\_\_\_\_  
 City: \_\_\_\_\_ State/Province: \_\_\_\_\_  
 Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 Primary Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Certifications: \_\_\_\_\_

### HOW DID YOU HEAR ABOUT ACP?

Referred by current member       ACP Web Site       Conference/Symposium  
 Chapter       Magazine/Newsletter       ACP Letter  
 Kick-off meeting e-mail       Other: please indicate: \_\_\_\_\_

### TYPE OF MEMBERSHIP (check only one box):

Chapter Member \$ \_\_\_\_\_ (See reverse for dues amount) Chapter Affiliation \_\_\_\_\_  
 General Member (no chapter affiliation) \$75.00 -- available only for those members 50 miles or more from the nearest chapter.

### METHOD OF PAYMENT

Full payment in US dollars must accompany this completed application form. ACP Federal ID#: 33-0049513

For application and payment via credit card, you may also visit our website at <http://www.acp-international.com/app-info.html>.

**Check Enclosed:** Made payable to "ACP."

**Please charge my credit card:**  Visa  MasterCard  AMEX  Discover/Novus

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Security Code (as it appears on your credit card): \_\_\_\_\_

Name as it appears on your card: \_\_\_\_\_

Signature: \_\_\_\_\_

### ACP CODE OF ETHICS

I have read and understand the ACP Code of Ethics (listed on reverse). I understand that willful violation of the ACP Code of Ethics may result in revocation of my membership, as determined by the Chapter Executive Committee and/or the Corporate Board of Directors.

Signature and Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Once your membership form is submitted, you will receive confirmation via e-mail that it has been processed. At that time, you will be asked to verify your membership profile online.

**SEND/FAX TO:** ACP Headquarters, 7044 South I3th Street, Oak Creek, WI 53154, Fax: 414-768-8001



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**QUESTIONS?** Call ACP Headquarters 414-908-4940, Ext. 450 or TOLL-FREE 800-445-4ACP, Ext. 450

### ACP CHAPTER DUES

Each Chapter establishes their Annual local membership fee, as listed below, which includes \$50 for Corporate ACP dues.

Alamo (San Antonio)	\$75	North Texas (Dallas)	\$90
Arkansas (Little Rock)	\$100	Northeast Florida (Jacksonville)	\$85
Atlanta	\$75	Northern Illinois	\$85
Capital of Texas (Austin )	\$86	Northern Ohio (Cleveland)	\$75
Central Arizona (Phoenix)	\$80	NY Capital Region (Albany)	\$75
Central Illinois (Bloomington/Normal)	\$80	New York City Metro	\$100
Central Maryland	\$85	Oklahoma (Okla. City/Tulsa)	\$100
Colorado Rocky Mountain (Denver)	\$100	Old Dominion (Richmond)	\$75
Connecticut	\$75	Orange County (California)	\$100
Eastern Great Lakes (Buffalo-Rochester-Syracuse)	\$75	Pittsburgh Tri-State	\$75
First State (Delaware)	\$75	Sacramento	\$75
Garden State (New Jersey)	\$100	San Diego (California)	\$100
Greater Boston	\$75	San Francisco Bay Area	\$100
Greater Chicago	\$85	Sioux Empire (South Dakota)	\$75
Greater Tampa Bay Area, Florida	\$100	SE FL (Miami/Broward/Palm)	\$75
Liberty Valley (Philadelphia)	\$75	South Texas (Houston)	\$90
Los Angeles (California)	\$85	Twin Cities (Minneapolis/St. Paul)	\$85
Michigan	\$75	Utah (Salt Lake City)	\$90
Mid-Florida (Orlando)	\$100	Washington DC—Mid-Atlantic	\$85
Mid Penn (Harrisburg)	\$75	Washington State (Seattle)	\$100
Mid-South (Memphis)	\$80	Mexico	\$100
Middle Tennessee (Nashville)	\$90		

If you live 50 miles or more from the nearest chapter, you may apply as a General Member. Dues for both domestic and international General Members are \$75.00 USD annually.

### ACP CODE OF ETHICS

The following Code of Ethics adopted by the Association of Contingency Planners shall govern the conduct of all members, member representatives, and invited guests. It is understood that anything of a sensitive and/or proprietary nature mentioned in ACP meetings, at ACP activities or written in ACP minutes or materials shall remain confidential and be handled as such. All members and guest attendees, in conjunction or connection with any or all ACP activities shall:

- Conduct themselves and their activities in a professional business manner.
- Abide by the Corporate and Chapter charters, bylaws and policies of the ACP.
- Properly register at all ACP meetings and activities.
- Not engage in sales activities or solicitation.
- Not conduct any other activity contrary to the purposes and objectives of the ACP.
- Not distribute any materials or post displays of any kind at ACP activities without the prior approval of Corporate Board and/or Chapter Executive Committee.
- Not engage in any form of personnel recruitment.
- Not use the ACP name other than in the conduct of ACP business, as determined by the bylaws and/or the Board of Directors.
- Be prohibited from the use of the ACP membership list, mailing list or any subsets thereof, except for ACP business. Membership lists are not to be furnished to non-members without the written permission of the ACP Board of Directors. Members who fail to observe this



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policy will be subject to loss of membership.

- Restrict the use of ACP proprietary documents to the use(s) defined by the policies and procedures of the ACP and/or the Board of Directors.
- Not publicly disclose verbal or written information pertaining to ACP business without prior written approval of the Board of Directors.