

# Process Servers Association of Colorado

8547 E Arapahoe Rd J-593, Greenwood Village, CO 80112

## APPLICATION FOR MEMBERSHIP

### Type of Membership:

\_\_\_\_\_ **Full Member           \$70.00**  
All rights and privileges of membership, including the right to vote and hold office.

\_\_\_\_\_ **Business Partner       \$30.00**  
All rights and privileges of membership, including the right to vote and hold office. Must be added at the time of application of the Full Member. One Business Partner may be added per company.

\_\_\_\_\_ **Associate Member       \$45.00**  
All rights and privileges of membership, excluding the right to vote and hold office.

\_\_\_\_\_ **Partners                       \$75.00**  
All rights and privileges of membership, excluding the right to vote and hold office. (This type of membership is reserved for attorneys, clients or vendors and those members who support the private process serving industry and wish to advertise on the PSACO website.)

**Your Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Partner Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Company Name:** \_\_\_\_\_

**Title/Position:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Phone:** ( \_\_\_\_\_ ) \_\_\_\_\_ **Fax:** ( \_\_\_\_\_ ) \_\_\_\_\_

**E-mail:** \_\_\_\_\_ **Website:** \_\_\_\_\_

**Type of business:** (i.e. corporation, partnership, LLC) **Year started:** \_\_\_\_\_

I have been affiliated with the process serving industry for \_\_\_\_\_ years.

Have you ever been convicted of a felony? Yes \_\_\_ No \_\_\_

Have you ever been convicted of a crime involving moral turpitude? Yes \_\_\_ No \_\_\_

- I authorize PSACO to investigate the statements made on this application and my qualifications for membership. I understand that membership, if granted, will be in my name and not in the name of any company owned by me or with which I am affiliated. I further understand that my membership cannot be transferred to another person. I agree to abide by the PSACO Bylaws and Code of Ethics and to all amendments thereto.
- I agree to submit to binding arbitration in all disputes with PSACO members involving fees, work performance and professional conduct in accordance with the procedures set forth in the Association's By-Laws. I declare under penalty of perjury that the statements made in this application are true and correct.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Partner: \_\_\_\_\_ Date: \_\_\_\_\_