**Member Information: Application for Associate\_\_\_\_ or Affiliate\_\_\_\_\_ (check one)**

|  |  |
| --- | --- |
| **Member Name** |  |
| **Company Name** |  |
| **Location/Address** |  |
| **E-mail** |  |
| **Website** |  | **Date of Birth** |  |
| **Phone** |  | **Cellular (What’sApp)** |  |
| **Social Networks** |  |

By means of this application I ask for my admission as an

Active member of AMPI, AC as well as AMPI Los Cabos, AC

committing myself totally to comply with the Statutes and the Code of Ethics of the association, to pay the corresponding dues on time, to carry out loyally the positions that are conferred upon me, to attend the meetings and programmed events and to use, in both my office facilities and my stationery, the AMPI logo that accredits me as member of this Association. If after being accepted, for any reason I leave the Association, from then on I assume the responsibility of not holding myself out as a member of this organization, nor using the logo in any form, and to give back the certificate of membership, the ID Card and any other material or symbol of AMPI. I also commit myself to try to improve every day in all professional aspects, with the object of giving to my clients the service that a Real estate Professional should provide. I promise to maintain the organization apprised of my legal status as an immigrant or Mexican citizen, by presenting the attached immigration document and passport, or mi IFE card.

Por medio de la presente solicito mi ingreso como miembro activo de AMPI, AC así como AMPI Los Cabos, AC comprometiéndome plenamente a cumplir con los Estatutos, así como con el Código de Ética de la misma, a cubrir puntualmente las cuotas correspondientes, a desempeñar lealmente los cargos que me sean conferidos, a asistir puntualmente a las juntas y eventos programados y a utilizar, tanto en mis instalaciones como en mi papelería, el logotipo que me acredita como miembro de dicha Asociación. Si después de ser aceptado mi ingreso, por alguna causa dejara de pertenecer a esta Asociación, desde ahora asumo la responsabilidad de no ostentarme como miembro de la misma, a no usar el logotipo bajo ninguna forma y a devolver el certificado de membresía, la credencial y el botón, así como cualquier otro material o distintivo propio de AMPI. Igualmente me comprometo a tratar de superarme cada día en todos los aspectos, con objeto de dar a todos mis clientes el servicio que debe ofrecer un Profesional Inmobiliario.

Prometo mantener a la organización informada de mi estatus legal como inmigrante o ciudadano mexicano, presentando mis documentos migratorios y pasaporte, o mi credencial del INE.

Member Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Information for invoice**

**(Every time you require an invoice, please notify the administration in advance)**

|  |  |
| --- | --- |
| **Full Legal name** |  |
| **Legal Address as in RFC** |  |
| **RFC number** |  |

**COST**

**$10,000.00 PESOS ASSOCIATE MEMBERSHIP**

 **$5, OOO.00 PESOS AFFILIATE MEMBERSHIP**

**Methods of Payment**

* **Wire Transfer**
* **Checks (payable to A.M.P.I Los Cabos, A.C)**
* **Bank deposit**

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**A.M.P.I. Los Cabos, A.C.**

US dollars

Account # 0600108551

CLABE 072045006001085516

Pesos

Account# 0600565305

 CLABE 072045006005653054

**Originals of this application and the proof of deposit must be submitted to the AMPI Los Cabos administration office in person or by email, as follows:**

Address: Paseo San José, plaza la Velas, San José del Cabo, BCS, México 23405

Email : info@ampiloscabos.com