

The Creditline



CFDD Portland Chapter Membership Application

Please type or print

I hereby make application for membership in the National Association of Credit Management, Credit Financial Development Division, Portland Oregon Chapter.

Company Data

Name: _____ Title: _____

Email: _____

Company: _____

Phone: _____ Fax: _____

Address (Mailing): _____

City/State/Zip: _____

Physical: _____

City/State/Zip: _____

NACM Affiliate/CRF which your firm belongs : _____ Member # _____

How/where did you hear about CFDD? _____

Personal Data

Address: _____

Phone#: _____ Birth month & date: _____

Annual dues are billed the end of October each year and the membership year is January 1 through December 31. Dues are \$110 per year and are prorated on the basis of \$9.17 per month.

Please bill my firm on the next NACM Commercial Services statement \$ _____

Applicant's signature _____

Date: _____

Please send the completed form to the following address:

Yvonne Prinslow
Hampton Lumber
9600 SW Barnes Rd, Ste 200, Portland, OR 97225
p 503.203.6495
f 503.291.5653
e YvonnePrinslow@HamptonLumber.com