Georgia Installment Lenders Association

Regular Membership Application

Name of Applicant Company

Headquarters Address

Date organized	# of Branches		
Company Officers & Managing Officers	Position in Company	How Long Active In Company/Industry	Percent Ownership
		/	
		/	
		/	

Loan License #	Contact Person in Branch	Mailing Address	Email Address

(If you have more than 3 offices, please attach a separate list with the above required information.)

Official Representative Name			Representative Title	
Mailing Address			City/St	Zip
Telephone	Fax	Email Address		
	Reference	s for companies applying for	r regular mem	bership
		Credit Insurance Com	pany	
	С	redit Insurance Company Repres	sentative Name	
Industry Affili	ation: List two refer	ences in the credit industry to whom	you are personally k	nown:
Name	Company			
Name		Company		
Business Refe	rences: List any oth	er business associations (local, state, 1	national) of which th	ne business is a member
Name		Contact		
Name		Contact		

Endorsers: List *two GILA members* who will endorse this applicant for membership

Name	_Company
Name	_Company

MEMBERSHIP APPLICATION CHECKLIST:

If you are applying for Regular Membership, the following documents must be attached to your completed application form before this application can be presented to the GILA Board of Directors:

- A resume of the company owner or senior manager
- ¹/₂ year or full year dues

<u>Membership Dues- Full Year \$240.00 per office (42 branches maximum)</u> Membership Dues Statements are mailed Semi-Annually

Membership in the Georgia Installment Lenders Association is non-transferable. If the ownership/partnership of the corporation changes, then the company will have to re-apply for membership in the Georgia Installment Lenders Association.

I understand that all offices under management or ownership (in Georgia) must also become dues paying members in order to qualify this application for membership. However, members with multiple offices, shall not be required to pay dues beyond the maximum number of 42 branches.

I pledge my complete cooperation and support of the efforts of the Georgia Installment Lenders Association and will uphold the constitution and by-laws as set forth by the Board of Directors. I will also conduct my business in a way that reflects positively on the credit industry and will set an example, as to discourage the practice of unethical behavior for myself, my employees, and my competitors, as described in the Code of Ethics.

I understand that by signing below, providing my mailing address, and telephone/fax number, I consent to receive communications sent by or on behalf of the Georgia Installment Lenders Association via email or fax.

Name of Applicant

Title

Signature

Date

THE MEMBERSHIP APPLICATION PROCESS & DUES INFORMATION:

After a **completed** application is received, the applicant is screened by the Membership Committee. If all steps have been satisfactorily completed the pending application is then presented to the GILA Board of Directors at the next meeting of the Board of Directors for consideration. The GILA membership year runs from January 1 through December 31 each year.

Return application, documents & application fee to us at the address below

Thank you for your interest in GILA – We look forward to meeting you!

Georgia Installment Lenders Association, Inc. P O Box 801, Macon, GA 31202-0801 Office: 478-746-3868 Fax: 478-743-8278 www.giloan.org