



ASSOCIATION OF CONTINGENCY PLANNERS MEMBERSHIP APPLICATION

Prefix _____	First Name _____	MI _____	Last Name _____	Nickname _____
Company Affiliation (if any) _____			Certifications _____	
Mailing Address _____			Work Phone _____	
_____			Alternate Phone _____	
Please include zip + 4 _____			Work Fax: _____	
			E-Mail Address _____	

TYPES OF MEMBERSHIP (Check One Box) Chapter Membership General Membership
(Only for those 50 or more miles from the nearest chapter.)

Chapter Name: Colorado Rocky Mountain Total Dues Enclosed: \$100.00 (Includes National & local Dues) Referred by: _____	ACP OFFICE USE ONLY
	Date Rec'd _____ Member No. _____
	Date Entered _____
	Check No. _____ Amt _____
	Visa/MasterCard #: _____
	Expiration Date: ____/____/____

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 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.

I have read and understand the ACP Code of Ethics. 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 Required: _____ **Date:** _____

Mail to: Technical Enterprises, Inc (TEI)
7044 S. 13th Street
Oak Creek, WI 53154
Phone: 1-800-445-4ACP
Fax: (414) 768-8001