



Association of Certified Professional Wedding Consultants

Dear Consultant:

Enclosed is detailed information regarding the steps in obtaining membership, or for renewing your current membership with the ACPWC. We feel you will truly find the benefits of membership worth the investment of time and money. Membership provides you with the necessary support to keep you informed on the latest in the industry through continued education and updates. It also allows you the chance to tour facilities and to do an internship with other ACPWC consultants. But the most important feature of membership is the camaraderie and the opportunity to exchange information and obtain advice from your fellow consultants.

Please complete and mail the attached 3-page Membership Application with your check and a copy of your business license. We will then forward to you a Membership Packet, which includes the Bylaws, Membership Roster, the newest updates and complete listing of meetings and tours. If you are unsure at this time, please email us at dmoodyacpwc.com. Dues must be payable no later than Sunday, February 28, 2009 in order to avoid late charges.

If you would like to order a name badge, please include \$20 with your membership fee. The name on the badge will be as it appears on your application unless otherwise notified.

If you have any questions concerning any of the enclosed information, please feel free to contact us and we will be happy to clarify the details for you. We hope that you will join us!

Best Regards,

Deborah Moody
Director
408 227-2792 (local)
408 226-0697 (fax)



Association of Certified Professional Wedding Consultants

MEMBERSHIP APPLICATION 2010

(Please **PRINT** and complete in full)

Name: _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: () _____ Home: () _____

Fax: () _____ Cell: () _____

Email: _____ (please print legibly)

Website: _____ Birthday _____

Date/Year of Graduation: _____: Personalized Course _____ Home Study _____

STATUS:

_____ Certificate of Completion	Date: _____
_____ Professional Title	Date: _____
_____ Certified Title	Date: _____

Presently Employed By: _____

Position: _____

Self Employed: Full Time _____ Part Time _____ How long _____

Membership Status: **Active** _____ Dues: \$225 year / ***Associate** _____ Dues: \$150 year
 *Members who do not belong to a specific chapter where they can attend meetings.

I would like to become a member of: _____ (Select Chapter)

(No. California So. California Georgia Texas Florida Colorado Alabama)

GOAL: Are you working towards Professional Title _____ or Full Certification Title _____

Talents or areas of interest/expertise _____

Comments we may quote: _____

SIGNATURE: _____ Date: _____

AGREEMENT

This agreement is entered into this date between the Association of Certified Professional Wedding Consultants (ACPWC) and the active or associate member listed below.

WHEREAS, both member and the ACPWC wish to continue their professional relationship and membership in the ACPWC.

WHEREAS, the By-laws and Code of Ethics of the ACPWC must be upheld and maintained by all members in good standing within the ACPWC;

Therefore, it is hereby agreed that said member:

1. is an active or associate member of the ACPWC.
2. agrees to uphold the principles of the ACPWC pursuant to its By-laws and Code of Ethics.
3. agrees to be loyal to the ACPWC and defend its integrity. In addition, member agrees not to compete with the ACPWC in any way or question the validity of the ACPWC.
4. agrees to maintain the confidences and trade secrets of the ACPWC and agrees not to compete with the ACPWC, including all future planning of the ACPWC.
5. agrees to behave in a professional manner at all times and will not display any negative attitude toward the ACPWC, including its board and members, and will avoid talking or emailing in any prejudicial or defamatory manner.
6. agrees to abide by all copyright laws pertaining to the educational feature of the ACPWC, and will not use any of the educational materials of the ACPWC for their own use or that of a competing organization.
7. agrees that said member will not serve on the Board of Directors, as Instructor or Chapter Chairperson of the ACPWC, if holding a leadership position in any other competitive organization.
8. agrees that said member will not disclose to any competing organization any information concerning the ACPWC, or received from the ACPWC, or obtained through their association with the ACPWC.

PURSUANT TO THE ABOVE, said member will remain an active or associate member of the ACPWC upon signing this Agreement. If any of the above contingencies are breached, as determined by the Board of Directors or the Honorary Chairperson, membership in the ACPWC will be terminated immediately, with notice, and all benefits and titles, including the use of the ACPWC logo, will be revoked forever.

Date _____

Deborah Moody, Director ACPWC

Signature

Business License Request Form

PLEASE ATTACH/STAPLE A COPY OF YOUR CURRENT CALENDAR YEAR BUSINESS LICENSE TO THIS FORM AND SIGN THE BOTTOM OF THE FORM.

_____ I hereby attest, to the best of my knowledge, that this is the most current copy of my business license.

_____ I hereby attest, that I am working as a facility/site coordinator and no license is required.

_____ I hereby attest, after checking the business license requirements in my area, that no license is required.

OTHER NOTATIONS:

Signature: _____

Date: _____

Attach: Membership Application, Agreement & Business License Form (3 pages)

Include check or money order made payable to ACPWC.

Mail or fax to 408.226.0697

Mail to: ACPWC

Deborah Moody

122 Destry Court

San Jose, CA 95136

Office Use: _____ **Renewal Application 2010**