

NAAIM Introductory Membership Application

2015 Dues: \$300.00

Date _____

Membership Type (check one)

Regular Members must be (1) Registered as an Investment Adviser with the Securities and Exchange Commission or with any state securities administrator for a period of at least one year. (2) Regularly engaged in active investment management for client accounts through the use of a limited power of attorney with respect to investment in mutual funds and other appropriate investment vehicles. (3) Subscribe to the NAAIM Code of Ethics and Fair Practices Policy.

Emerging Members must be (1) Registered as an Investment Adviser with the Securities and Exchange Commission or with any state securities administrator for a period of less than one year. (2) Regularly engaged in active investment management for client accounts through the use of a limited power of attorney with respect to investment in mutual funds and other appropriate investment vehicles. (3) Subscribe to the NAAIM Code of Ethics and Fair Practices Policy.

Special Members must be (1) regularly engaged in active investment management for client accounts through the use of a limited power of attorney with respect to investment in mutual funds and other appropriate investment vehicles. (2) Subscribe to the NAAIM Code of Ethics and Fair Practices Policy (3) Membership must be accepted by a NAAIM board of directors vote and will last for one calendar year.

Return this form with completed credit card information, or a check payable to NAAIM and fax or mail to:

NAAIM

6732 W. Coal Mine Ave., #446
Littleton, CO 80123

303-979-1280 • (Fax) 303-979-2192
Info@naaim.org • www.naaim.org

- Check enclosed payable to NAAIM
- Charge to ___ VISA ___ MasterCard or ___ Amex

Card Number _____

Exp. Date _____

Signature of Card Holder _____

Credit card billing address if different from the company address:

Street _____

City, State, Zip _____

(Please Print)

How did you learn about us? _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Primary Company Contact Name: _____

Contact Title: _____

E-Mail Address: _____

Web Site Address: _____

Compliance Contact: _____

Marketing Contact: _____

Operations Contact: _____

SEC or State Registration Number (required if you are a regular or emerging member firm) _____

Please mark the appropriate responses pertaining to your firm.

Assets Under Management:

- (check appropriate box)
- Less than \$10 million
- \$10 million to \$25 million
- \$25 million to \$50 million
- \$50 million to \$100 million
- \$100 million to \$150 million
- \$150 million to \$200 million
- \$200 million to \$300 million
- \$300 million to \$400 million
- \$400 million to \$500 million
- \$500 million +

Management Style:

- Absolute Return
- Directional (long/short/cash)
- Strategic Asset Allocation
- Sector Rotation
- Tactical Asset Allocation
- Other _____

Market To/Through:

- Direct to Clients
- Brokers
- Insurance Agents
- Institutions
- Multimanager Platforms
- Financial Planners
- Accountants
- Attorneys

Assets Custodied At:

- Advisors Preferred / Ceros
- Direxion Investments
- Fidelity
- FOLIOfn
- Pershing
- ProFunds / ProShares
- Millennium Trust Company
- Guggenheim
- Schwab
- TD Ameritrade
- Trust Company of America
- Other _____

Top 3 Investment Vendors:

- Direxion Investments
- I Shares
- Jefferson National
- ProFunds / ProShares
- Putnam Investments
- Guggenheim
- Security Benefit
- State Street ETFs
- Van Eck
- Wisdom Tree
- Other _____

Investment Software:

- Amibroker
- AIQ
- Bloomberg
- eSignal
- FastTrack
- FundMaster
- Investools
- Metastock
- Real Tick
- TradeStation
- Wealth-Lab Developer
- Proprietary
- Other _____

Is the member FIRM primarily a:

- Money Manager
- Asset Gatherer
- Both
- Neither

Primary Contact Designations:

- (Check all that apply)
- CFP
- ChFC
- CLU
- CPA
- PFS
- CFA
- CMT
- JD
- Other _____

The following Statement of Adherence must be signed for membership approval.

Statement of Adherence: Membership in NAAIM shall constitute a continuing representation of the member to NAAIM that such member is without knowledge of any fact or facts that would constitute professional misconduct by the member or covered person(s) associated with the member as defined in Section 7 of the NAAIM Bylaws.

I, _____, hereby affirm my receipt and understanding of the foregoing representation and by my signature below deliver our annual statement of adherence to the governing documents of NAAIM (Articles of Incorporation and Bylaws, Code of Ethics, Performance Measurement Standards, Fair Practice Policy) found at www.naaim.org. Any exceptions as defined in Section 7(b) Professional Misconduct, are reported below as required.

Signature Date

Exception(s) to statement of adherence: _____