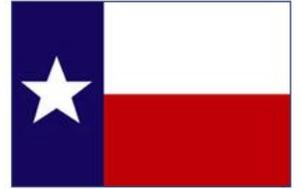




Texas Accredited Repossession Professionals (TexasARP)
www.TexasARP.org
"Unity and Camaraderie Will Prevail"



Texas Accredited Repossession Professionals Vendor Registration Form

Thank you for your interest and support in our association.

Our goal is to create education amongst our members, clients, law enforcement and the State of Texas. We intend to encourage professionalism and leadership within our industry.

TexasARP Vendor:

Any Persons, firms, organizations or associations that supply goods and services to the repossession industry.

TexasARP Memberships dues are Annual: September 1st – August 31st

Please refer to the "Join" page for the current membership dues. www.TexasARP.org

Please select one option:

_____ Vendor - Includes: Company information with company logo and link on the TexasARP website "Vendor" page.

_____ \$700.00 Banner Ad: Includes all of the above and your company logo linked to your website on our home page in rotation.

TexasARP Vendor Registration Form:

Company Name: _____

Contact Name: _____

Company Mailing Address: _____

Company Phone Number: _____ Company Fax Number: _____

Company Email: _____ Company Website: _____

*Mobile Phone (will not be listed on website): _____

****Company Logo:** Email your logo to: info@TexasARP.org

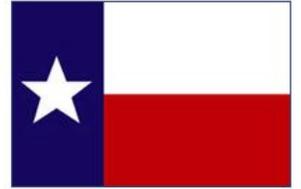
I would like to donate an additional \$_____ to TexasARP's general fund. This will help to offset the expenses of the association and keep us moving forward by providing education and training to the industry. You can also make a donation via PayPal from the "Contact" page on our website at any time. www.TexasARP.org



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We look forward to your participation and value your opinion.

Our preferred method of payment is by check, as to avoid paying credit card possessing fees.

Pay by Credit Card: We accept Visa, Master Card or American Express.

Card Number: _____ CVC Code: _____ Expiration Date: _____

Card Holders Name: _____ Card Holders Phone Number: _____

Card Holders Billing Address: _____

Card Holders Signature: _____ Date: _____

If you have any questions please contact the president at: (281) 507-4513

Email the following vendor form to: info@TexasARP.org

Fax to: (832) 770-4908

Mail the Membership Form and your check to:

TexasARP
9203 Hwy 6 South #124
Houston, TX 77083

*Returned checks will be assessed a \$ 30.00 service charge.