



Knoxville Chapter #138

ASSOCIATION OF CERTIFIED FRAUD EXAMINERS
KNOXVILLE TENNESSEE CHAPTER
MEMBERSHIP APPLICATION

Name _____ Nickname: _____
Professional Certifications: _____
Job Title: _____
Employer: _____
Preferred Mailing Address: Office: _____ Residence: _____
Street: _____ Email Address: _____
City: _____ State: _____ Zip Code +4: _____
Telephone: Office () _____ Home () _____
Cell () _____

Please include me in any directory that is made available only to other members
Yes ___ No ___

Knoxville, TN Chapter Membership Dues and Stipulations
Please Indicate Membership Level

___ Certified Member (\$40.00) A Certified Member is a CFE and current member in good standing with the National Association of Certified Fraud Examiners (ACFE). ACFE Member ID# _____
** A Certified Member is eligible to vote, hold offices in the Chapter, and serve on Chapter committees.

___ Associate Member (\$20.00) An Associate is an Associate current member in good standing with the National ACFE. ACFE Member ID# _____
** An Associate Member is eligible to vote, serve on Chapter committees, and hold offices in the Chapter, other than President, and Training Director.

___ Student Affiliate Member (\$10) (Note: Student affiliate status is available to full time students only).

ANNUAL DUES ARE PAYABLE ON OR BEFORE January 1 of each year.

Mail this application, your check, (payable to Knoxville Chapter-Association of Certified Fraud Examiners) and your business card to:
Knoxville Chapter ACFE
P.O. Box 1927
Knoxville, TN 37901

This is a Membership Renewal/New Membership Application (Please circle one)
If new member, I was referred by: _____

Annual Dues for the Knoxville ACFE Chapter do not include annual dues for National ACFE membership.

Signature _____ Date _____