



Membership Application

May 1, 2021 - July 31, 2022

Name _____ Nickname _____

Professional certifications _____

Areas of expertise _____

Job title _____

Employer _____

Email _____ Preferred mailing address Office Residence

Mailing address: Street _____

City _____ State _____ Zip+4 _____

Telephone: Office _____ Fax _____ Mobile _____

Have you been convicted of a felony or misdemeanor involving moral turpitude (“moral turpitude” means an offense that calls into question the integrity or judgement of the offender, such as fraud, bribery, corruption, theft, embezzlement, solicitation, etc.)? Yes No (If yes, please describe on back.)

Chapter Memberships

Indicate your desired membership type below. Membership privileges begin May 1, 2021, and end July 31, 2022. Dues are not prorated.

Member \$40 A Member is required to be a Certified Fraud Examiner in good standing. Members may vote and hold office in the Chapter.

Associate \$40 An Associate is not required to be a Certified Fraud Examiner. Associates may vote and hold office in the Chapter. ACFE membership is required.

Affiliate \$40 An Affiliate may attend meetings and receive CPE Credit. ACFE membership is not required. Affiliates are not Chapter members.

Student \$10 Must be carrying 12 or more semester hours at a school of higher education. A Student is not a Chapter member and need not be an ACFE member.

To be a member of the ACFE-Greater OKC Chapter, you must be either a CFE in good standing, a non-certified Associate Member of the ACFE, or a full-time student. To become a member of the Association of Certified Fraud Examiners, please refer to their website at www.acfe.com or call (800) 245-3321.

Please send this application, a business card, and your check to:

**ACFE – Greater OKC Chapter
PO Box 12237 • Oklahoma City, OK 73157**

Make your check or money order payable to “ACFE-Greater OKC Chapter.”

Have you already paid these dues online? Yes No

I hereby certify that the information contained on this application is true and correct. If accepted, I agree to abide by the CFE Code of Professional Ethics as well as the Chapter Bylaws.

Signature _____ Date _____