AAMMA's Corporate Compliance Policy

l,		have read AAMMA's Corporate C	Compliance Policy. I agree
to conduct all AAMMA ac	tivities' in accorda	ance with AAMMA's Corporate Co	ompliance Policy. I
understand that if I condu	ıct any AAMMA a	ctivity outside of AAMMA's Corpo	orate Compliance Policy,
I'm violating AAMMA's Po	olicy and I'm subj	ect to dismissal and/or legal actic	n by AAMMA and/or local
authorities.			
I agree to review AAMMA	a's Corporate Cor	npliance Policy annually which ca	an be found at:
http://www.aamma.info/d	orporatecompliar	nce.html	
AAMMA Volunteer	Date	Witness / Notary*	Date
	Notary's State ID		

^{*}If this form is downloaded from AAMMA's website, the agreeing volunteer must have the form notarized and mailed to AAMMA at: 111 Willow Lake Dr. Fairhope, AL 36532. The form may be signed in the presence of an AAMMA Board Member.