



# NOTARY ROTARY®

## AUTHORIZED AFFILIATE PROGRAM (NRAAP)

Please complete this form if you would like to join the Notary Rotary Authorized Affiliate Program (NRAAP).  
Version 1.2

# NRAAP APPLICATION

### Company / Partner Prospect Information

<b>Company Name</b>	
<b>Contact Name</b>	
<b>Web Site</b>	
<b>E-mail Address</b>	
<b>Physical Address</b>	Street Address:  Street Address 2:  City: State: ZIP:
<b>Mailing Address</b>	Street Address: Same as above [ ]  Street Address 2:  City: State: ZIP:
<b>Phone</b>	
<b>Fax</b>	
<b>EIN</b>	
<b>Do You Have a Notary Rotary Account?</b>	[ ] No [ ] Yes, my user name is:
<b>Are You an Approved Educational Vendor?</b>	[ ] No [ ] Yes
<b>Are You a Licensed Insurance Agent?</b>	[ ] No [ ] Yes, my license number is:

### Which Program Options are You Interested In?

<b>Retailer / Vendor Eligibility ONLY</b>	<b>Open Eligibility</b>
[ ] Option 1 - Notary Supply Kits	[ ] Option 3 - Discount Letters
[ ] Option 2 - Volume Purchase	[ ] Option 4 - Fulfillment
	[ ] Option 5 - Affiliate Link

### Briefly Describe Your Marketing Plan for Notary Rotary Products:

By signing below, I am requesting to participate in the Notary Rotary Authorized Affiliate Program.  
If accepted, I agree to all terms and conditions detailed in the NRAAP Agreement.

\_\_\_\_\_  
Authorized Signature / Title or Capacity

\_\_\_\_\_  
Date

**PLEASE FAX THIS COMPLETED FORM TO NOTARY ROTARY AT 877-349-6590  
OR E-MAIL TO PARTNERS@NOTARYROTARY.COM**