



**CLUB  
MANAGEMENT  
ASSOCIATION  
OF AMERICA**

# Certified Chief Executive (CCE) Verification Form

I hereby certify that \_\_\_\_\_

served as the most senior-level staff member of the \_\_\_\_\_

with full authority over all personnel from \_\_\_\_\_ to \_\_\_\_\_

in the capacity of \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

I hereby swear or affirm that the above information is complete and correct to the best of my knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Sworn and subscribed before this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_

Notary Public \_\_\_\_\_