



Membership Application 2016

Management Co/Independent Owner Name _____

Names and emails of Owner, Partners or Officers of Corporation _____

Main Office Address _____ City _____ State _____ Zip _____ County _____

Company email _____ Website _____

Phone _____ Fax _____

Branch Office (if any) _____

Main representative in your firm whom communications should be addressed. Include address & email if different from above:

Name _____ Address _____

Email _____

How long have you been engaged in business in the state of Indiana? _____ Years

Was the firm ever a member of the Apartment Association under the present name or any other name? Yes _____ No _____

If yes, give name(s) of the type of membership and name(s) under which formerly enrolled _____

Total number of units owned or managed in Indiana _____ Total number of communities owned or managed in Indiana _____

Please list all communities below. If necessary, attach additional sheets.


1) Community Name	Mailing Address	City	Zip	County
Phone	Fax	Manager	Email address	# of units
Section 42/Section 8?				
* Incorporated Y N				
2) Community Name	Mailing Address	City	Zip	County
Phone	Fax	Manager	Email address	# of units
Section 42/Section 8?				
* Incorporated Y N				
3) Community Name	Mailing Address	City	Zip	County
Phone	Fax	Manager	Email address	# of units
Section 42/Section 8?				
* Incorporated Y N				
4) Community Name	Mailing Address	City	Zip	County
Phone	Fax	Manager	Email address	# of units
Section 42/Section 8?				
* Incorporated Y N				

Management Company/Independent Owner Name: _____

Total Units x	Per Unit +	Base Fee = 2016 Dues Owed
0 - 9	\$.85	\$220
10 - 49	\$.85	\$302
50 - 349	\$3.53	\$200
350 & over	\$2.70	\$250

Dues payment must accompany application. Membership dues are based on the above schedule. If you are already an IAA Member and would like to join the **Apartment Association of Southern Indiana**, please contact IAA at (317) 816-8900 for local dues. Membership dues are prorated after March 1 to ensure your membership remains active on a calendar year. Please include your check with this application form and mail to:

Indiana Apartment Association
9100 Keystone Crossing, Suite 725
Indianapolis, IN 46240
Fax: 317-816-8911

Or, pay by Credit Card:	Total Dues \$ _____
 Card # _____	
Name on Card _____	Expiration Date _____
Cardholder's Address _____	Security Code _____
City _____	State _____ Zip _____

This firm certifies that the foregoing statements are true & accurate and agrees if elected to membership that in accepting the privileges it will also accept the obligations of membership; that it will be governed by the by-laws of the Apartment Association of Southern Indiana and the Indiana Apartment Association as long as it continues as a member and further agrees to promote the objectives of the association. We consent to receive any and all e-mail and fax communications from IAA or persons acting on their behalf.

Important Tax Information: Under the provisions included in section 1070(a) of the Revenue Act passed by Congress in December, 1987: 1. Contributions to the Apartment Association of Southern Indiana are not deductible as charitable contributions for federal income tax purposes. 2. In compliance with Omnibus Budget Reconciliation Act of 1993, 28.61% of membership dues are not deductible as a business expense. 3. For specific guide-lines concerning your particular situation, it is recommended that you consult a tax professional.

In the event of termination of membership in the *Apartment Association of Southern Indiana*, this firm agrees to discontinue the use of the insignia in any form. The applicant whose signature appears below hereby authorizes the *Apartment Association of Southern Indiana* to investigate the history of the past seven years for the purpose of determining approval or disapproval of this membership application.

Date _____ Mgmt. Co/Independent Owner Name _____

Signature _____ Title _____

Mailing Address _____

Recommended for membership by Member _____

NOTE: As a member of this association, you become a member of the National Apartment Association. \$30.00 of each member's annual membership dues goes toward a one-year subscription of NAA's Units magazine and is non-deductible from association dues payment. As a member of this association, you are entitled to all membership benefits and services of the National Apartment Association and Indiana Apartment Association at member rates.