



MEMBERSHIP APPLICATION

BENEFITS OF MEMBERSHIP INCLUDE:

- *MEMBERSHIP MEETINGS
- *TRADE SHOW
- EDUCATIONAL SEMINARS
- *ASSOCIATION NEWSLETTER
- *ASSOCIATION BY-LAWS
- *ELECTRONIC MEMBERSHIP LISTING
- *MEMBERSHIP IN BOTH THE NAA & GAA WITH BENEFITS OF BOTH ASSOCIATIONS

OPPORTUNITIES INCLUDE:

- *PARTICIPATION IN THE DECISION MAKING THROUGH THE BOARD OR THE ASSOCIATE COUNCIL
- *SERVING ON ONE OF THE COMMITTEES WHICH ARE VITAL TO THE ASSOCIATION

THESE COMMITTEES ARE:

- *EDUCATION
- *ASSOCIATES COUNCIL
- *EXECUTIVE
- *FINANCE
- *GOVERNMENTAL AFFAIRS
- *MEMBERSHIP
- *NOMINATING

*MEMBERSHIP TYPE: Owner/Manager Vendor/Associate Management Company

*Company/Property Name: _____

*Member Representative: _____

*Address: _____

*City, State & ZIP: _____

*Phone: _____ *Fax: _____

*E-mail: _____ *Website Address: _____

*Number of Units: _____ *Management Company: _____

Year Built/Established _____ Locally Owned: Yes No

Associate/Vendor Only:

*Principal Type of Business: _____ * # of Years in Business: _____

Home Office Address & Phone Number (if different) _____

*MGAA Member Who Recommended Membership (if applicable): Please include Name & Number _____

PLEASE PRINT ALL INFORMATION *Required
*All Mid Georgia Apartment Association records will be based on the information supplied.
 Incomplete applications will be returned.
 Changes in membership information must be reported to mgaaonline@gmail.com
 to insure that you continue to receive membership benefits.*

PLEASE ACKNOWLEDGE YOUR UNDERSTANDING OF THE FOLLOWING INFORMATION BY SIGNING BELOW:
 This application is made in accordance with and subject to the bylaws and articles of incorporation of the Mid Georgia Apartment Association. I agree to abide by the Code of Ethics of the Association. The Mid Georgia Apartment Association may use all of the information provided to contact me about MGAA services, products and events. I hereby apply for membership and enclose payment for the first year's dues. Dues payments to the Association may be deductible as a business expense, but are not deductible as a charitable contribution. Dues payments are non-refundable.

Your membership also includes membership in the National and Georgia Apartment Association with benefit in both. **Your membership also includes 4 free meetings during the calendar year.** In the event of termination of membership for any reason, I agree to discontinue use of the Association's insignia, products and signs in any form.

I hereby certify that the information on this application is correct as of this date.

SIGNATURE: _____ DATE: _____

Check One	CATEGORIES OF MEMBERSHIP	DUES SCHEDULE
<input type="checkbox"/>	All memberships must pay an initial processing fee or reinstatement fee in addition to the annual dues.	\$25.00
<input type="checkbox"/>	Owner/Manager/Developer with TOTAL involvement of 1- 50 units	\$290 per year plus \$1.00 per unit
<input type="checkbox"/>	Owner/Manager/Developer with TOTAL involvement of 51 to 100 units	\$340 per year plus \$1.00 per unit
<input type="checkbox"/>	Owner/Manager/Developer with TOTAL involvement of 101 to 300 units	\$390 per year plus \$1.00 per unit
<input type="checkbox"/>	Owner/Manager/Developer with TOTAL involvement of 301 units or more	\$440 per year plus \$1.00 per unit
<input type="checkbox"/>	Associate (all other allied with the rental housing industry)	\$440 per year
<input type="checkbox"/>	Fee Based Management (for Management Companies Only)	\$200 per year
<input type="checkbox"/>	Check for dues in the amount of \$ _____ attached.	

MEMBERSHIP DUES ARE BASED ON THE CALENDAR YEAR, JANUARY 1 THROUGH DECEMBER 31, AND ARE PRO-RATED BEGINNING OCTOBER 1. ANY PRO-RATED MEMBERSHIP DUES WOULD BE REQUIRED TO PAY THE PRO-RATED FEE FOR THE CURRENT YEAR AS WELL AS THE DUES FOR THE UP-COMING YEAR.

Send completed application with check to: MGAA, P.O. BOX 1443, Forsyth, GA 31029.
 We also accept VISA, Mastercard, American Express & Discover. If you wish to pay with a credit card, please complete the attached credit card authorization form & fax both completed forms to: 478-994-8774, OR email both completed forms to mgaaonline@gmail.com

The Mid Georgia Apartment Association is a member driven organization whose primary purpose is to promote and protect the interest of the multi-housing industry.

An affiliate of the National Apartment Association in Washington, DC and the Georgia Apartment Association in Atlanta, MGAA works to achieve its purpose through three primary areas:

- **Legislation** – as the local advocate for city, state and national legislation beneficial to the apartment industry and free enterprise;
- **Education** – offering a number of various programs and seminars for multi-housing professionals; and
- **Communication** – Using our various publications & programs to keep members informed on issues and events pertinent to the apartment industry.

In addition, MGAA conducts membership meetings featuring qualified speakers on a variety of industry related topics. These meetings give members the opportunity to network with fellow property owners, professional managers, and industry suppliers.



CREDIT CARD AUTHORIZATION FORM

Company Name: _____

Name on Card: _____

Billing Address: _____

Email Address: _____

Amount to Charge: _____

Type of Credit Card: American Express Discover VISA Mastercard

Card Number: _____

Expiration Date: _____ *CCID Code: _____

Authorized Signature: _____

*Three digits on back of VISA & Mastercard, four digits on front of American Express.