

Community Association Board Resolution for CAI Membership

Whereas, The _____ Association (hereafter referenced as the "Association") board serves in the best interests of all owners in the community;

Whereas, The Association directors have the fiduciary responsibility to manage the assets of the Association according to established business practices and principles, and pursuant to competent, ethical and positive community governance; and

Whereas, The Association directors need to stay abreast of trends and best practices in community association governance, management and operations; and

Whereas, Community Associations Institute (CAI) is dedicated to providing information, education and best practices to help association leaders build and sustain strong and viable communities; and

Whereas, CAI is the leading advocate for common-interest communities before state and federal legislative and regulatory bodies; and

Whereas, Current and future Association residents will benefit from the training and education provided to their directors by CAI—both nationally and through chapters; and

Whereas, CAI membership will give Association directors access to valuable ideas, information and insights through magazines, newsletters, web content and educational events; and

Whereas, CAI membership will serve the best interests of current and future owners of the Association;

Resolved, That the Association invest in a full or partial board membership package; and

Resolved, That it is the policy of the Association that board members join CAI and take full advantage of CAI membership to optimize the governance and management of the community; and

Resolved, That the Association's annual budget shall include funding for CAI membership, and that said memberships be transferred from any departing director to the new director. Attendance at CAI education events may be paid by the Association, at the discretion of the board, requiring an affirmative vote by a majority of the directors and recorded in the open meeting minutes; and

Resolved, That the Association strongly encourages its manager and other professional service providers to take advantage of CAI membership to gain the knowledge, information and insights that enable them to better serve the association.

SO RESOLVED BY THE BOARD OF DIRECTORS on this, the ____ day of _____ in the year _____.

Secretary of the Board

CAI Community Association Leader and Homeowner Membership Application



Joining CAI is easy. Simply follow the steps below. Please print clearly.

STEP 1: Primary Contact. This contact has sole authority to make changes to the membership. DATE _____
In some instances both this contact and the billing contact may be the same.

This primary contact should receive member benefits through an individual membership or as one of the paid board memberships. Yes No
If yes, there is no need to enter the individual's contact information again in the *Sign Up Your Board Members* section on page 2.

MR. MRS. MS. DR. LEGAL FIRST NAME _____ LAST NAME _____ SUFFIX _____
NICKNAME _____ ADDRESS _____
CITY _____
STATE/PROVINCE _____ POSTAL CODE _____ COUNTRY _____
ASSOCIATION NAME _____
HOME PHONE _____ MOBILE PHONE _____
FAX _____ EMAIL _____

Did someone recommend that you join CAI? Please give name and organization. _____

Privacy Option (visit www.caionline.org/about/privacy to review full policy):

I do not wish my name and/or address information to be provided to any outside organizations for promotional purposes.

STEP 2: Calculate Your Member Dues

Individual Board Member, Homeowner, or Public Official:	Membership Fee	\$105
	Advocacy Support Fee	\$15*
	Total Membership Dues	\$120

Every dollar of the mandatory \$15 Advocacy Support Fee goes directly to states with Legislative Action Committees and supports the efforts of CAI to represent and protect our members on state legislative and regulatory issues. *Fees for board membership: 2 Member Board—\$30 3 Member Board—\$45 4+ Member Board—\$60

The Foundation for Community Association Research operates on behalf of the industry and conducts surveys and research, provides national programming, and produces a variety of publications including the series of Best Practices reports. Donations to the Foundation are tax deductible. We recommend a \$10 donation from an individual board member or \$15 from a board of 2 or more members.

Board membership—enjoy CAI's group discount program—the more board members you sign up, the more you save! Select the dues amount below based on the total number of members you are signing up. Total dues amounts include advocacy support fee.

2 Member Board—\$210 3 Member Board—\$285 4 Member Board—\$375 5 Member Board—\$425 6 Member Board—\$480 7 Member Board—\$535
For rates on additional board members, call (888) 224-4321 (M–F, 9–6:30 ET).

STEP 3: Membership Payment—U.S. Dollars Only

Total Member Dues _____
Foundation Donation (optional) _____
Suggested donation level for 1 board member—\$10 _____
or board of 2 or more—\$15 _____

TOTAL PAYMENT: \$ _____ *Membership dues are non-refundable.*

Check enclosed (made payable to CAI) Visa MasterCard American Express Discover

NAME ON CARD _____ SIGNATURE _____

BILLING ADDRESS _____

CITY _____

STATE/PROVINCE _____ POSTAL CODE _____ COUNTRY _____

CARD NO. _____ EXP DATE _____

Once completed, submit your application and payment.

PHONE: (888) 224-4321 (credit cards only)

MAIL: CAI, P.O. Box 34793, Alexandria, VA 22334-0793

ONLINE: www.caionline.org/join (credit cards only)—start enjoying your benefits today!

FAX: (240) 524-2424 (credit cards only)

STEP 4: Billing Contact (The billing contact will receive membership renewal notices and does not have to be part of the paid membership.)

MR. MRS. MS. DR. LEGAL FIRST NAME _____ LAST NAME _____ SUFFIX _____

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STEP 5: Choose Your Chapter. Membership in a local chapter is included in your membership. For a complete chapter list visit www.caionline.org/chapters/find. If you don't choose a chapter one will be assigned for you based on your zip code.

CHAPTER CHOICE _____

(IF JOINING 2 OR MORE PEOPLE, PLEASE CONTINUE ON PAGE 2)

Membership application for _____

ASSOCIATION NAME

PAGE 2 OF 2

BOARD MEMBERSHIP Complete the following sections ONLY if you are joining 2 or more people.

Association Information

NAME OF ASSOCIATION (SPELL OUT COMPLETELY) _____
_____ ACRONYM _____

ASSOCIATION ADDRESS _____

CITY _____

STATE/PROVINCE _____ POSTAL CODE _____ COUNTRY _____

ASSOCIATION PHONE _____ FAX _____

ASSOCIATION EMAIL _____ ASSOCIATION WEBSITE _____

Sign Up Your Board Members. Please provide the contact information for the members of your board you are signing up for membership.
IMPORTANT: A full name must be provided for each board member due to postal service regulations and to ensure delivery of mailed membership benefits. Names such as "Board Member" and "Treasurer" or other officer positions may not be used. When possible, please provide an e-mail address as many CAI benefits are delivered electronically.

MR. MRS. MS. DR. LEGAL FIRST NAME _____ LAST NAME _____ SUFFIX _____

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FAX _____ EMAIL _____

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If you would like to add additional members, please make a photocopy of this form.