

2018 MEMBERSHIP APPLICATION

DC I MD Chapter

naiop.org									
□Mr □	⊐Ms	□Mrs	□Dr	□Prof					
NAME (First M	II Last)						NICKNAME		
TITLE				COMPANY			V	VEBSITE	
BUSINESS ADI	DRESS					CITY/STATE		ZIP	
PHONE				FAX		EMAIL			
HOME ADDRE	SS (Stree	et address, Apt. #	f, City, S	tate, & Zip)			□YES, please	send <i>Development</i>	magazine to my home.
Compa	any F	Profile							
Number of ea		es at my locati	ion:	□ 1-10 □ Re	□ 11-40 gional □	☐ 41-75 I National	□ 76-100	□ 101-150	☐ Greater than 151
Business Str (based on Fe	ructure:			•	Limited Liability Corporation Public REIT	on	•	n-Profit o Chapter	☐ Partnership
Areas of Invo	olvemer	nt (select all th	nat app	ly): 🗆 Industrial	☐ Medical/Life Sciences	S ☐ Mixed-Use	☐ Multi-Family	☐ Office	☐ Retail
My company	, is invo	lved in the dev	velopm	ent of green (envir	onmentally sustainable) į	properties or provides	green products/servio	ces: □Yes [□No
Square feet of	owned o	or managed:		Less than 1 Million	☐ 1-2.5 Million ☐	☐ 2.6-5 Million ☐	5.1-7.5 Million	7.6-10 Million	☐ 10.1 Million or more
Corporate So	cope of	Business (sel	ect one	e):					
Associate M ☐ Academici ☐ Accountan ☐ Architect ☐ Attorney ☐ Broker	ian C nt C	Communicati Consultant Contractor Economic De	eV	☐ Environmental ☐ Financier ☐ Insurance ☐ Interior Design ☐ Land Planner	 □ Landscape Architect □ Property Manager □ Public Official □ Publisher □ Service Provider 	☐ Supplier ☐ Telecomm ☐ Title Company ☐ Utility	Principal Member ☐ Asset Manager ☐ Investor	□ Developer	□ Owner (Property)
Member Profile Specific areas in which I am primarily involved (select all that apply):									
Industry topi	ics of in	levelopment o terest (select Business (sele	all that	apply): □ Adv	☐ Retail sustainable) properties, p rocacy ☐ Busin	·		- inance	☐ Marketing/Leasing
Associate N	Member						Principal Member		
☐ Academici ☐ Accountan ☐ Architect ☐ Attorney	nt C	Communicati Consultant Contractor Economic De		☐ Environmental ☐ Financier ☐ Insurance ☐ Interior Design	□ Landscape Architect□ Property Manager□ Public Official□ Publisher	☐ Supplier ☐ Telecomm ☐ Title Company ☐ Utility	☐ Asset Manager☐ Investor	□ Developer	☐ Owner (Property)
□ Broker □ Engineer □ Land Planner □ Service Provider Are you a partner or a member of an LLC or LLP? □ Yes □ No							via fax at 703-904 an application at	olication and return it to NAIOP 1-7942. You may also complete www.naiop.org. Call 800-456-4144.	

NAIOP MEMBERSHIP APPLICATION (Special)—Page 2	Name			
Member-				
☐ Principal Full Member: \$965 The first individual employed by an organization whose primary business is development, ownership, asset management or investment. (Dues that may not be deducted as a business expense: \$258.89)	The following questions are optional and your resality. The information will only be used to assist I products and services. NAIOP uses this informat needs of our diverse membership are being met.			
☐ Principal Affiliate Member: \$525 You must be the second or subsequent person from the principal member firm, within the same chapter (Dues that may not be deducted as a business expense: \$146.27)	Year of Birth: (
☐ Associate Full Member: \$965 The first individual employed by an organization providing products and services. (Dues that may not be deducted as a business expense: \$258.89)	☐ African American ☐ Asian,☐ Hispanic ☐ Americ☐ Caucasian ☐ Other			
☐ Associate Affiliate Member: \$525 You must be the second or subsequent person from the associate member firm, within the same chapter. (Dues that may not be deducted as a business expense: \$146.27)	Membership Agreement			
☐ Chapter-Based Corporate Membership (First 4 members): \$2365 Please select one: ☐ Principal ☐ Associate Four or more individuals within the same company and same chapter qualify for this discount. Primary contact should be listed above; list others on a separate sheet.	NAIOP memberships are individual, not by may choose to transfer the membership to company paid for or reimbursed you for the			
Add'l members: \$350 (Dues that may not be deducted as a business expense: \$668.16)	Signature By signing above, I acknowledge that I will acceptions from NAIOP.			
□ Developing Leader Member: \$275 To qualify, you must be 35 years of age or less. *Proof of age must accompany this application or your membership cannot be fully activated.* Developing Leader membership is excluded from qualifying for a chapter-based corporate member-	Payment Information			
ship. (Dues that may not be deducted as a business expense:\$76.55)	(from selected Membership Category)			
☐ Student Member: \$69 Any full-time student, not employed full-time, is eligible. ★ A copy of your Student ID and your most recent class schedule are required and must accompany this application before your membership can be fully activated.★ (Dues that may not be deducted as a business expense: \$27.24)	NAIOP Dues New Member Processing Fee (one-time) Total Payment Authorized			
☐ Academician Member: \$425 Any full-time professor who is not otherwise employed in the commercial real estate industry. (Dues that may not be deducted as a business expense: \$99.28)	□ VISA □ MasterCard □ AMEX			
☐ Public Official Member: \$425 Any individual employed by a local, state, or federal government or non-profit organization. (Dues that may not be deducted as a business expense: \$99.28)	Credit Card Number			
☐ Public Official Affiliate Member: \$425 You must be the second or subsequent person from the organization joining the same chapter as the Public Official member. (Dues that may not be deducted as a business expense: \$99.28)	Name of Cardholder (please print)			
poriso. \$77.207	Billing Address (if different from main contact info			
How Did You Hear About Us?	Charle Fault and Armable to MAIOD			
□ Local Chapter	☐ Check Enclosed (payable to NAIOP) Please include application with check. Do not fa			
□ NAIOP Conference (event)	will not be processed without actual payment.			
□ NAIOP Website	☐ Invoice me for my membership			
☐ Member Referral (name)	Your membership will become active when payn			
□ Direct Mail				
☐ Phone Call	AL NAIOD dues are for 12 months of months are			

☐ Media

☐ Personal Research

☐ Social Media ☐ Other (_

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ality. The information will only be	nai and your responses will be neid in strict confident- used to assist NAIOP in the development of new res this information to track trends and ensure that the o are being met.
Year of Birth:	Gender: ☐ Male ☐ Female
Ethnic Background:	
☐ African American	☐ Asian, Pacific Islander or Native Hawaiian
☐ Hispanic	☐ American Indian or Native Alaskan
☐ Caucasian	☐ Other
Membership Agreem	nent
	vidual, not by company. However, your company embership to another individual at any time if the ed you for the membership.
Signature By signing above, I acknowledge tions from NAIOP.	that I will accept emails, faxes, and other communica-
Payment Information	
(from selected Membership Cate	gory)
NAIOP Dues New Member Processing Fee	(one-time) \$
Total Payment Authorized	\$
□ VISA □ MasterCard □] AMEX
Credit Card Number	Exp. Date
Name of Cardholder (please print)
Billing Address (if different from m	nain contact information)
☐ Check Enclosed (payable Please include application with ch	e to NAIOP) heck. Do not fax application and/or copy of check as it

nent is received and processed.

- * NAIOP dues are for 12 months of membership, except for corporate affiliates. (Please call for details). For Federal income taxes, NAIOP dues are not deductible as a charitable contribution. However, most of the dues amount may be deducted as a business expense.
- **★** The \$20 processing fee is a one-time fee and will not appear on renewal notices.
- **★** Questions about NAIOP's Refund Policy? Please call the Membership Department at 800-456-4144.