

**MIDWEST ASSOCIATION OF HOUSING COOPERATIVES, INC.
APPLICATION FOR MEMBERSHIP**

CO-OP/ORG NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: (____) _____ FAX: (____) _____

E-MAIL ADDRESS: _____
BILLING ADDRESS (IF DIFFERENT FROM ABOVE)

TYPE OF MEMBERSHIP

COOPERATIVE (REGULAR)

OF UNITS _____ TYPE (213, 221, 236, CONV) _____

ANNUAL MEETING DATE: _____ DATE BUILT: _____

MANAGEMENT AGENT: _____

ANNUAL DUES FOR REGULAR MEMBERS: \$2.00 FOR 1 – 300 UNITS AND \$1.00 THEREAFTER, WITH A MINIMUM OF \$100.00 AND
MAXIMUM of \$1000.00

PROFESSIONAL (ASSOCIATE)

TYPE OF BUSINESS _____

PARTNERSHIP CORPORATION PC NONPROFIT

IN BUSINESS SINCE: _____

C.E.O: _____

ASSOCIATE DUES ARE \$250.00

AFFILIATE (CONDOS, LIBRARIES, COUNCILS, ETC.)

TYPE OF ORGANIZATION: _____

AFFLIATE DUES ARE \$100.00 PER YEAR

INDIVIDUAL (NON-PROFESSIONALS ONLY)

INDIVIDUAL DUES ARE \$50.00 PER YEAR

MAILING LIST INFORMATION

PRESIDENT

() _____

VICE PRESIDENT

VICE PRESIDENT

() _____

SECRETARY

() _____

TREASURER

() _____

OTHER

() _____

OTHER

() _____

ON SITE MANAGER

() _____

FOR OFFICE USE ONLY

UNITS _____

SEC _____

REF# _____

NDU _____

MDU _____

AM _____

LISTUP _____

PRIOR _____