



1655 Fort Myer Drive, Suite 200
Arlington, VA 22209
Fax: 703-558-0401
Contact: kmckee@mfghome.org

2021 National Retailers Council MEMBERSHIP APPLICATION

Please select the membership category that best represents your company's core business.

A. RETAILER

- Applicants joining as a Retailer must also be a member of a manufactured housing state association.
Which state association does your company belong to? _____

Number of retail locations: _____ x \$100 per location. \$ _____

Number of states in which your company does business: _____

Number of new homes sold in the last calendar year: _____

A retail sales center must be a member of a state association in all states where physical retail sales centers are operated and licensed by the state if licensing is required.

B. DEVELOPER \$575

- This category is for those companies that develop or plan to develop with manufactured housing communities but do not currently own or manage a community.

MEMBER COMPANIES AGREE TO ABIDE BY THE MHI BYLAWS AND THE PROCEDURES OF THE NATIONAL RETAILERS COUNCIL.

I hereby certify the information in this application is true and correct, and I agree failure to provide complete and accurate information as requested, or any misstatement of fact, shall be grounds for revocation of my membership in MHI, if granted. I further agree that, if accepted for membership in MHI, I shall pay dues and abide by MHI's Bylaws, rules and directives, including those covering use of MHI's trademark and other intellectual property.

By signing below, I consent to MHI contacting me at the specified address by any means of communication available and to having my information listed in MHI's directory of members.

SIGNATURE: _____ DATE: _____

NAME PRINTED: _____

COMPANY NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE: _____
WEB SITE: _____

PRIMARY CONTACT serves as the company's main point of contact for MHI membership and billing. In addition, the primary contact will receive all MHI communications, votes on behalf of the member company and may run for office positions available to the membership category.

ALTERNATE CONTACT serves in place of the primary contact when he/she is absent or unavailable.

PRIMARY CONTACT: _____
TITLE: _____ EMAIL: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE: _____

ALTERNATE CONTACT: _____
TITLE: _____ EMAIL: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE: _____

MARKETING CONTACT : _____
TITLE: _____ EMAIL: _____
PHONE: _____

Application Fee and Dues Payment

- Enclosed is a check for our membership dues as indicated plus the \$100 application fee.*
 Please charge our credit card for our membership dues as indicated plus the \$100 application fee.*

*\$100 application fee only applies to Developer Members at the \$575 rate.

CARD NUMBER: _____ EXPIRES: _____
BILLING ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
NAME ON CARD: _____ SIGNATURE: _____

SEND COMPLETED APPLICATION FORM AND PAYMENT TO:

MHI | Attn: Team Development
1655 Fort Myer Drive, Suite 200, Arlington, VA 22209
Contact: kmckee@mfghome.org | FAX: 703-558-0401

Internal Revenue Service rules require us to remind you that contributions or gifts to the Manufactured Housing Institute are not tax deductible as charitable contributions for federal income tax purposes. However, dues payments may be tax deductible by members as ordinary and necessary business expenses subject to restrictions imposed as a result of association lobbying activities. MHI estimates that the non-deductible portion of your 2021 dues – the portion which is allocable to lobbying - will be 30 percent.

Final approval of your membership application will be determined by MHI's Board of Directors.