

## **Manufactured Housing Division Membership Application**

## **Company Name** Address ZIP City State Website Phone Is your company incorporated? **Not Sure** Yes Nο Who referred you? **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 ZIP City State Phone **Alternate Contact** Title **Email** Address State ZIP City Phone **Billing Contact** Title (If different than Primary)

Phone

Email

Manufacturer	• • • • • • • • • • • • • • • • • • • •	\$35 per home produced	
Once your company's application is approand return with payment. Although dues			
Application Fees and Dues Payment			
Enclosed is a check for our membership dues as in	ndicated plus the \$100 application fee.		
Please charge our credit card for our membership	dues as indicated plus the \$100 application fe	ee.	
Card Number		Expires	
Billing Address			
City	State	ZIP	
Name on Card	Signature		
MEMBER COMPANIES AGREE TO ABIDE BY THE MHI BYLAWS	S AND THE PROCEDURES OF THE MANUFACTURED	HOUSING DIVISION.	
I hereby certify that the information in this application is true a misstatement of fact, shall be grounds for revocation of my m and abide by MHI's Bylaws, rules and directives, including the contacting me at the specified address by any means of comme	nembership in MHI, if granted. I further agree that, if use covering use of MHI's trademark and other intelle	accepted for membership in MHI, I shall pay dues ectual property. By signing below, I consent to MHI	
Signature	Date		
Printed Name			