

## **National Modular Housing Council 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 approreturn with payment. Although dues are page 1	• • • • • • • • • • • • • • • • • • • •	•	
application Fees and Dues Payment			
Enclosed is a check for our \$100 application fee.			
Please charge our credit card for our \$100 applicat	ion fee.		
Card Number		Expires	
illing Address			
ity	State	ZIP	
lame on Card	Signature		
MEMBER COMPANIES AGREE TO ABIDE BY THE MHI BYLAWS	AND THE PROCEDURES OF THE NATIONAL MOD	OULAR HOUSING COUNCIL.	
I hereby certify that the information in this application is true a misstatement of fact, shall be grounds for revocation of my me and abide by MHI's Bylaws, rules and directives, including thos contacting me at the specified address by any means of comm	embership in MHI, if granted. I further agree that, e covering use of MHI's trademark and other intel	if accepted for membership in MHI, I shall pay dues llectual property. By signing below, I consent to MHI	
Signature	Date		
Printed Name			