



Please Mail Completed Form With Payment To:
 Western Pennsylvania Apartment Association
 P.O. Box 15790, Pittsburgh, PA 15244
 Telephone: (412) 288-9780 -- Fax: (724) 371-0741
 web: www.TheWPAA.com -- email: thewpaa@aol.com

Application for Membership

PLEASE PRINT OR TYPE

Membership Name:			
# of Properties:	(multiple properties fill out attached form)		
Company Contact:			
Title:			
Mailing Address:			
City:	State:	Zip:	
Physical Address:			
City:	State:	Zip:	
Telephone Number:	Fax Number:		
Management Company:			
E-mail Address:	Web Site Address:		
Business Type:			

CHECK MEMBER CATEGORY

<input type="checkbox"/> Owner / Builder / Manager Member - <i>Any owner, builder, or manager with multi-housing units who operates or has interests in the State of Pennsylvania.</i>	<input type="checkbox"/> Associate Member - <i>Members providing products/services to other members.</i>
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ANNUAL MEMBERSHIP INVESTMENT FORMULA

<input type="checkbox"/> Owner / Builder / Manager Member = \$315.00 + \$1.00 per unit + \$20.00 per multiple properties (Single Property Member with under 50 units, no charge per unit)	<input type="checkbox"/> Associate Member = \$295.00 Web Link available \$60.00 per link per year
\$ 315.00 [+ Total Units _____ x \$1.00] = \$. [+ Total Properties _____ x \$20.00] = \$. TOTAL DUE = \$.	Flat Rate \$ 295.00 Web Link = \$. TOTAL DUE = \$.

By applying for this membership I/We agree to abide by the Bylaws of the Western Pennsylvania Apartment Association.

Applicant Signature:	Date:
<input type="checkbox"/> Paying by check # _____ <input type="checkbox"/> Invoice Me Amount \$ _____	
<input type="checkbox"/> Paying by Credit Card <small>The estimated 2011 percentage of NAA dues that are non-deductible for income tax purposes is 15%</small>	
This portion of the application will be completed by the WPAA.	
Sponsoring Member:	
Membership Committee Rep:	
Date of Application:	Date of Board Approval:

New members are required to submit annual dues within 30 days of application submission.