

## **2023 MEMBERSHIP APPLICATION**

## Georgia Chapter

□Mr	□Ms	□Mrs	□Dr	□Prof								
NAME (Fi	rst MI Last)								NICKNAME			
TITLE				COMPANY						VEBSITE		
BUSINES	S ADDRESS					CIT	Y		STAT	E/PROVINCE	ZIP/POSTAL CODE	
PHONE	E FAX				M	MOBILE			EMAIL			
HOME AE	DDRESS (Stree	et address, Apt.	#, City, State/F	Province, Zip/Postal C	ode)				□YES	i, please send <i>Development</i>	magazine to my home.	
Mem	ıber Pr	ofile										
Specific	areas in wh	nich I am prim	narily involve	ed (select ALL tha	t apply):		dal Madisalilita C		- Missalli			
•		·	,	•	11.27	<ul><li>☐ Industr</li><li>☐ Retail</li></ul>	rial ☐ Medical/Life So ☐ Other	ziences	☐ Mixed-U	se 🗆 Multi-Famil	y □ Office	
Persona	I Scope of E	Business ( <u>sel</u>	ect ONE):		I							
PRINC	CIPAL Mem	nbers are:			A	SSOCIATE	Members are:					
□ Asse	t Manager	$\square$ Investor	□ Own	er (Property)		Academician	☐ Communications		ronmental	□ Landscaper	□ Supplier	
□ Deve	loper					Accountant	□ Consultant	□ Fina		□ Property Manager	□ Telecomm	
						Architect Attorney	<ul><li>☐ Contractor</li><li>☐ Economic Dev</li></ul>	☐ Insu	rance ior Design	<ul><li>☐ Public Official</li><li>☐ Publisher</li></ul>	<ul><li>☐ Title Company</li><li>☐ Utility</li></ul>	
						Broker	☐ Engineer		l Planner	☐ Service Provider	□ Ounty	
Are you	a partner o	f an LLC or L	<b>LP?</b> □Yes	□No	ı							
Dem	ograpl	hic Pro	file									
The fo	ollowing ques ervices. NAIC	tions are optio OP uses this in	onal and your oformation to	responses will be i track trends and en	held in str nsure that	ict confidentia the needs of d	lity. The information will our diverse membership	only be us are being	ed to assist l met.	NAIOP in the developmen	nt of new products	
Birth	date: _			Gender Ider	ntity: $\Box$	l Male	□ Nonbinary or gen	derfluid	☐ Prefer	to self-describe:		
		Month/Day/\	'ear			l Female	☐ Prefer not to resp	ond				
Race	and Ethnic	c Identity										
·						Hispanic/Latinx			☐ Prefer not to respond			
					_ Middl∈	Middle Eastern or North African				☐ Prefer to self-describe:		
☐ Black or African American ☐ \( \)					☐ White	White						
How	Did Y	ou Hea	r Abou	t Us?								
□NA	NOP Chapter	r					☐ Phone Call					
	IAIOP Conference (event					)	□ Media					
	MOP Contere					/	□ Social Media					
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Complete this application and return it to NAIOP via fax at 703-904-7942 or email membership@naiop.org. You may also complete an application online at www.naiop.org. Have questions? Call 800-456-4144.

NAIOP MEMBERSHIP APPLICATION—Page 2	Name				
Membership Category					
☐ Principal Full Member (First): \$1175 The first person employed by an organization whose primary business is development, owne \$87.10)	rship, asset management or investment. (Dues that may not be deducted as a business expense:				
☐ Principal Affiliate Member (Second and Third): \$695 You must be the second or third person from the principal member firm, within the same chap	pter (Dues that may not be deducted as a business expense: \$42.25)				
☐ Corporate Affiliate Member (Fourth and each additional): \$525 The fourth and each additional person within the same company and same chapter qualify	y for this discount. (Dues that may not be deducted as a business expense: \$22.75)				
☐ Associate Full Member (First): \$1285 The first person employed by an organization providing products and services. (Dues that may	not be deducted as a business expense: \$87.10)				
☐ Associate Affiliate Member (Second and Third): \$755 You must be the second or third person from the associate member firm, within the same cha	apter. (Dues that may not be deducted as a business expense: \$42.25)				
☐ Corporate Affiliate Member (Fourth and each additional): \$575  The fourth and each additional person within the same company and same chapter qualify	y for this discount. (Dues that may not be deducted as a business expense: \$22.75)				
☐ Developing Leader Member: \$285  To qualify, you must be 35 years of age or less (born 1986 or later). *Proof of age must a (Dues that may not be deducted as a business expense: \$19.50)	ccompany this application or your membership cannot be fully activated.*				
☐ Student Member: \$30  Any full-time student, who is not employed full-time, is eligible. *A copy of your Student IL your membership can be fully activated.* (Dues that may not be deducted as a business expe					
☐ Academician Member: \$485  Any full-time professor who is not otherwise employed in the commercial real estate industry.	. (Dues that may not be deducted as a business expense: \$42.25)				
☐ Public Official Member: \$810 Any individual employed by a local, state, or federal government or non-profit organization. (I	Dues that may not be deducted as a business expense: \$42.25)				
☐ Public Official Affiliate Member: \$485 You must be the second or subsequent person from the organization joining the same chapter	er as the Public Official member. (Dues that may not be deducted as a business expense: \$42.25)				
Membership Agreement	Payment Information				
NAIOP memberships are individual, not by company. However, your company may choose to transfer the membership to another individual at any time if the company paid for or reimbursed you for the membership.	(from selected Membership Category)  NAIOP Dues New Member Processing Fee (one-time) + \$20  Total Payment Authorized \$				
Signature	□ VISA □ MasterCard □ AMEX				
By signing above, I acknowledge that I will accept emails, faxes, and other communications from NAIOP.					
	Credit Card Number Exp. Date				
★ NAIOP dues are for 12 months of membership. For Federal income taxes, NAIOP dues are not deductible as a charitable contribution. However, most of the dues amount may be deducted as a business expense.	Name of Cardholder (please print)  CVV  Billing Address (if different from main contact information)				
★ The \$20 processing fee is a one-time fee and will not appear on renewal notices.	□ Check Enclosed (payable to NAIOP)  Please include application with check. Do not fax application and/or copy of check as it will not be processed without actual payment.  □ Invoice me for my membership  Your membership will become active when payment is received and processed.				
★ Questions about NAIOP's Refund Policy? Please call the Member- ship Department at 800-456-4144.					