

2023 MEMBERSHIP APPLICATION

Southern Nevada Chapter

□Mr	□Ms	□Mrs □	□Dr	□Prof							
NAME (Fir					NICKNAME						
TITLE				COMPANY						/EBSITE	
IIILL				COMPANT					V	LDSITE	
BUSINESS	S ADDRESS					CITY			STAT	E/PROVINCE	ZIP/POSTAL CODE
PHONE		F	AX		MOBILE			E	EMAIL		
HOME AD	DRESS (Stree	et address, Apt. #, C	City, State/Pi	ovince, Zip/Postal C	ode)				□YES	, please send <i>Developmen</i>	magazine to my home.
Mem	ber Pr	ofile									
Specific	areas in wh	nich I am primari	ly involve	d (select ALL tha	t apply):	Industria	al □ Medical/Life So	ciences	☐ Mixed-U:	se □ Multi-Fami	ly □ Office
Porsonal	l Scone of F	Business (select	ONE).			Retail	☐ Other				
	CIPAL Mem		ONL).		45500	YATE N	lembers are:				
			□ Oumo	r (Property)	☐ Acaden		☐ Communications	□ Envii	ronmental	☐ Landscaper	☐ Supplier
☐ Devel	: Manager Ioper	☐ Investor	□ Owne	і (Ріорену)	☐ Accoun		□ Consultant	☐ Fina		☐ Property Manager	☐ Telecomm
	.opo.				☐ Archited	ct	☐ Contractor	☐ Insur	ance	☐ Public Official	☐ Title Company
					☐ Attorne	y	☐ Economic Dev	☐ Inter	ior Design	☐ Publisher	. J □ Utility
					☐ Broker		☐ Engineer	□ Land	l Planner	☐ Service Provider	
Are you	a partner o	f an LLC or LLP	? □Yes	□No	·						
Dem	ograp	hic Profil	е								
							y. The information will Ir diverse membership			IAIOP in the developme	nt of new products
Birtho	Birthdate : Gender Identity			ntity: 🗆 Male		☐ Nonbinary or genderfluid		☐ Prefer to self-describe:			
		Month/Day/Year			□ Fema	le	☐ Prefer not to resp	oond			
Race	and Ethnic	c Identity									
·				☐ Hispanic/Lati	Hispanic/Latinx			☐ Prefer n	☐ Prefer not to respond		
□ A				•	•				☐ Prefer to self-describe:		
				☐ White	White						
	D 1111										
How	Did Y	ou Hear <i>I</i>	About	:Us?							
□ NA	IOP Chapter	r					☐ Phone Call				
□ NA	IOP Confere	ence (event)		☐ Media				
□ NA	IOP Website	9					☐ Social Media				
□ Me	mber Referr	al (name)		☐ Personal Resear	ch			
□ Dire	ect Mail						☐ Other ()

Complete this application and return it to NAIOP via fax at 702-798-8653 or email info@naiopnv.org. You may also complete an application online at www.naiop.org. Have questions? Call 702-798-7194

Membership Category								
☐ Principal Full Member (First): \$1000 The first person employed by an organization whose primary business is development, ownership, asset management or investment. (Dues that may not be deducted as a business expense: \$149.32)								
☐ Principal Affiliate Member (Second and Third): \$550 You must be the second or third person from the principal member firm, within the same chapter (Dues that may not be deducted as a business expense: \$83.05)								
☐ Associate Full Member (First): \$1000 The first person employed by an organization providing products and services. (Dues that may not be deducted as a business expense: \$149.32)								
□ Associate Affiliate Member (Second and Third): \$550 You must be the second or third person from the associate member firm, within the same chapter. (Dues that may not be deducted as a business expense: \$83.05)								
□ Corporate Affiliate Member (Fourth and each additional): \$350 The fourth and each additional person within the same company and same chapter qualify for this discount. (Dues that may not be deducted as a business expense: \$58.45)								
☐ Developing Leader Member: \$345 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: \$54.18)	accompany this application or your membership cannot be fully activated.*							
□ Student Member: \$19 Any full-time student, who is not employed full-time, is eligible. * A copy of your Student ID and current class schedule are required and must accompany this application before your membership can be fully activated.* (Dues that may not be deducted as a business expense: \$2.47)								
□ Academician Member: \$525 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: \$77.95)								
□ Public Official Member: \$525 Any individual employed by a local, state, or federal government or non-profit organization. (Dues that may not be deducted as a business expense: \$77.95)								
□ Public Official Affiliate Member: \$525 You must be the second or subsequent person from the organization joining the same chapter as the Public Official member. (Dues that may not be deducted as a business expense: \$77.95)								
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								
By signing above, I acknowledge that I will accept emails, faxes, and other communications from NAIOP.	□ VISA □ MasterCard □ AMEX							
	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.							
★ Questions about NAIOP's Refund Policy? Please call the Member- ship Department at 800-456-4144.	☐ Invoice me for my membership Your membership will become active when payment is received and processed							

Name_

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