## **CAI Management Company Member Application**



Joining CAI is easy. Simply follow the steps below. Please print clearly.

OR skip the form, join online and start receiving your benefits today! >>



STEP 1: Membership Contact Information Members	ship materials will be sent to this address	. DATE
O MR. O MRS. O MS. O MX. O DR. FIRST NAME	LAST NAME	SUFFIX
TITLE		BUSINESS ACRONYM
BUSINESS/ORGANIZATION (SPELL OUT COMPLETELY)		
O BUSINESS OR O HOME ADDRESS		
CITY		
STATE/PROVINCE	POSTAL CODE	_COUNTRY
BUSINESS PHONE	DIRECT PHONE	
MOBILE PHONE	HOME PHONE	
BUSINESS FAX	UNIQUE EMAIL ADDRESS	
BUSINESS WEBSITE		
Did someone recommend that you join CAI? Please give name and o	organization.	
Privacy Option (visit www.caionline.org/about/privacy to review full policy):  O I do not wish my name and/or address information to be provided	to any outside organizations for promotional p	urposes.
STEP 2: Calculate Your Member Dues		
Membership Fee \$415	5	
Advocacy Support Fee \$25	_	
Total Membership Dues \$440		
Foundation Donation (optional) \$20  Total Dues including Foundation Donation \$460	_	
Every dollar of the mandatory \$25 Advocacy Support Foundation and protect our members on state legislative and regula	ee goes directly to states with Legislative Acti	on Committees and supports the efforts of CAI to represent
The Foundation for Community Association Research oper a variety of publications including the series of Best Practic		reys and research, provides national programming, and produces deductible.
\$39 of annual membership dues is for your non-refundable to Community Manager.	e subscription to <i>Common Ground™ and</i> \$35 of	annual membership dues is for your non-refundable subscription
STEP 3: Membership Payment—U.S. Dollars Only		
TOTAL MEMBER DUES: \$ Membership dues a	are non-refundable. If applicable in your state, s	ales tax will be added to membership dues.
O Check enclosed (made payable to CAI) O Visa O Maste	erCard O American Express O Discov	ver
NAME ON CARD	SIGNATURE	
BILLING ADDRESS		
CITY		
STATE/PROVINCE	POSTAL CODE	COUNTRY
CARD NO		EXP DATE
<b>STEP 4: Choose Your Chapter.</b> Membership in a local chapters/find. If you don't choose a chapter one will be assigned.	chapter is included in your membership. gned for you based on your zip code.	For a complete chapter list visit www.caionline.org/
CHAPTER CHOICE	olato a Multi Chamtar mancharchin annic	ation available at very spicaline are the patite
If you wish to add additional chapters for a fee, please comp	oiete a iviuiti-Chapter membership applic	ation available at www.caionline.org/benefits
<b>STEP 5:</b> Submit your application and payment.		
PHONE: (888) 224-4321 (credit cards only)	all about only about activities on the Co.	l
ONLINE: www.caionline.org/join (credit cards or electror MAIL: CAI, P.O. Box 748562, Atlanta, GA 30374-8562	nic cneck only)—start enjoying your benefits to	oay!
EMAIL: payments@caionline.org (credit cards only)		

IMPORTANT TAX INFORMATION: Under the provisions of section 1070(a) of the Revenue Act passed by Congress in 12/87, please note that gifts to CAI are not tax-deductible as charitable contributions for federal income tax purposes. However, they may be deductible as ordinary and necessary business expenses subject to restrictions imposed as a result of association lobbying activities. CAI estimates that the non-deductible portion of your dues is 17%. Visit www.caionline.org/advocacydisclosure for state exceptions that may apply to you. For specific guidelines concerning your particular tax situation, consult a tax professional. CAI's Federal ID number is 23-7392984.