



AHMA 2017 MEMBERSHIP APPLICATION

AHMA's mission is to sustain affordable housing by building relationships and supporting the success of our members through education, legislative information and networking opportunities.

MEMBERSHIP BENEFITS

- Reduced registration fees for industry training and events, including the Annual Washington Affordable Housing Management Convention.
- Affiliation and representation with the National Affordable Housing Management Association (NAHMA)
- Opportunity to directly affect State and Federal legislation through direct access to policymakers.
- Access to valuable resources including member-only web pages, NAHMA News, email updates, model documents and industry standards guides.
- Timely industry information about regulatory changes, legislative issues, policy proposals and funding availability.
- Access to low-cost property and casualty insurance through Insurance Plan for Association Housing (IPAH).
- Eligibility to serve in leadership positions and participate in national committees.

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MEMBER CATEGORIES

Professional Members

Includes developers, owners, managers, builders, housing authorities, syndicators, accountants, attorneys, bankers, non-profit organizations, government agencies

Cost: \$250/year + \$3/unit*

* For properties that are enrolling in the association

Small Company Members

Includes small project owners or managers with 25 units or less of affordable housing.

Cost: \$75/year

Associate Members

Includes suppliers and commercial vendors whose clients are Professional Members of AHMA. Includes discount to Annual Meeting and Conference. Joint membership with Affordable Rural Housing Council (ARHC)

Cost: \$260/year (non-voting)



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Applicant Organization Name: _____

Contact Person Name: _____

Phone: _____ **Email:** _____

Mailing Address: _____

City/State/Zip: _____

Please list all properties owned/managed that you are enrolling below. Include property name, address, program type (LIHTC, HUD, RD, Section 8, etc.) and total number of units in projects. Attach additional sheets if necessary.

Project Name	Project Address	Program Type	# Units
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Select Membership Type: Professional Member Small Company Associate Member
Annual Membership Fee: \$ _____ + Total # units managedx3 _____ = **Total \$** _____