



GENERAL MEMBERSHIP APPLICATION

South Dakota Multi-Housing Association
2204 W Madison Street, Sioux Falls, SD 57104
Phone: (605) 336-7756 Fax: (605) 271-0565
E-mail: info@sdmha.com

Please Complete This Form and Return With Payment to the above Address

CONTACT NAME _____ Wk.# _____ Hm.# _____

COMPANY NAME _____ Cell # _____ Fax _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

EMAIL _____

RECOMMENDED BY _____

GENERAL MEMBERSHIP

For individuals, partnerships, corporations or other legal entities who own, operate, manage, plan, build and/or develop rental housing, condominiums, cooperatives and other forms of multi-family properties in South Dakota.

Please list below your rental properties

ADDRESS	# UNITS	TYPE OF UNIT: House, Duplex, Apt., Etc.
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

TOTAL NUMBER OF UNITS _____

ANNUAL MEMBERSHIP DUES

1-20 Units	\$90.00 + \$3.20 per unit owned/managed
21-100 Units	\$110.00 + \$3.00 per unit owned/managed
101-199 Units	\$120.00 + \$2.60 per unit owned/managed
200-499 Units	\$640.00 + \$0.25 per unit owned/managed
500-999 Units	\$640.00 + \$0.30 per unit owned/managed
1000+ Units	\$400.00 + \$0.50 per unit owned/managed

AFFILIATE MEMBERSHIP

For apartment managers who would like to receive mailings of meeting notices, "Rental Review" publications, etc.

CONTACT NAME _____ PHONE _____

COMPANY NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

EMAIL _____

ANNUAL AFFILIATE DUES
\$40 per year

I (We) hereby pledge to be a member(s) in the South Dakota Multi-Housing Association and to help work for the protection and freedom of this Association, its members and the principles the Association represent.

SIGNED _____

AMOUNT OF REMITTANCE _____ DATE _____

**Membership subject to approval by SDMHA Board

FOR OFFICE USE ONLY: Approved By: _____ Date _____ Certificate Sent _____