

2020 MEMBERSHIP APPLICATION

Chicago Chapter

□Mr	□Ms	□Mrs	□Dr	□Prof							
NAME (First	MI Last)							NICKNA	ME		
TITLE				COMPANY					WEBSITE		
BUSINESS	ADDRESS					CIT	Y	STATE/	PROVINCE	ZIP/POSTAL CC)DE
PHONE			FAX			MOBILE		EMAIL			
HOME ADD	RESS (Street a	address, Apt. #	[#] , City, State/I	Province, Zip/P	ostal Code)				□YES, please send Devel	<i>lopment</i> magazine to m	y home.
Comp	bany Pi	rofile									
Number of	f employees	at my locat	ion: 🗆 1	-10		11-40	□ 41-75	□ 76-100	□ 101-150	□ Greater th	an 151
Area of Op	perations:	🗆 Local			Regional		National	□ Internatio	onal		
Business (based on	Structure: Federal tax	purposes)	Corpo Privat		Limited I Limited Public	d Liability Corporatio REIT	on Limited Liability Sole Proprietors		□ Non-Profit □ Sub Chapter	□ Partnership	
Areas of Ir	nvolvement	(select ALL	that apply)	: 🗆 Ind	ustrial	□ Medical/Life Scie	ences 🗆 Mixed-Us	ie 🗆 Mu	lti-Family 🗆 Offic	ce 🗆 F	Retail
Square fee	et owned or	managed:	□ Less	than 1 Millior	ı □1	-2.5 Million	2.6-5 Million	5.1-7.5 Million	□ 7.6-10 Million	□ 10.1 Million or	more
Corporate	Scope of B	usiness (<u>sel</u>	ect ONE):								
PRINCI	PAL Membe	ers are:				ASSOCIATE	Members are:				
Asset M Develop	-] Investor	C Own	er (Property)		Academician Accountant Architect	Communications Consultant Contractor	 Environmer Financier Insurance 	ntal Landscaper Property Mai	-	omm
						□ Attorney □ Broker	Economic Dev	□ Interior Des □ Land Plann	sign 🗆 Publisher	□ Utility	unpany
Memb	per Pro	file									
Specific a	reas in whic	h I am prima	arily involv	ed (select Al	LL that ap	ply): □ Industr □ Retail	rial □ Medical/Life So □ Other	ciences 🗆 Mi	ixed-Use 🗆 Mult	ti-Family 🗆 Of	fice
Personal	Scope of Bu	siness (<u>sele</u>	ct ONE):								
PRINCII	PAL Memb	ers are:				ASSOCIATE	Members are:				
Asset M Develop	-	Investor	□ Own	er (Property)		 Academician Accountant Architect Attorney Broker 	Communications Consultant Contractor Economic Dev Engineer	Environmen Financier Insurance Interior Des Land Plann	Property Mai	al 🛛 Title Co	omm

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.org

Membership Category

Principal Full Member (First): \$830

The first individual employed by an organization whose primary business is development, ownership, asset management or investment. (Dues that may not be deducted as a business expense: \$130.65)

□ Principal Affiliate Member (Second and Third): \$465

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: \$63.38)

Associate Full Member (First): \$830

The first individual employed by an organization providing products and services. (Dues that may not be deducted as a business expense: \$130.65)

□ Associate Affiliate Member (Second and Third): \$465

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: \$63.38)

Corporate Affiliate Member (Fourth and each additional): \$280

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: \$34.13)

Developing Leader Member: \$200

To qualify, you must be 35 years of age or less (born 1984 or later). * Proof of age must accompany this application or your membership cannot be fully activated.* (Dues that may not be deducted as a business expense: \$29.25)

□ Student Member: \$45

Any full-time student, 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: \$3.71)

□ Academician Member: \$435

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: \$63.38)

□ Public Official Member: \$435

Any individual employed by a local, state, or federal government or non-profit organization. (Dues that may not be deducted as a business expense: \$63.38)

□ Public Official Affiliate Member: \$435

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: \$63.38)

How Did You Hear About Us?

Local Chapter
NAIOP Conference (event)
□ NAIOP Website
Member Referral (name)
Direct Mail
Phone Call
Media
Personal Research
Social Media
□ Other ()

Name

Demographic Profile

The following questions are optional and your responses will be held in strict confidentiality. The information will only be used to assist NAIOP in the development of new products and services. NAIOP uses this information to track trends and ensure that the needs of our diverse membership are being met.

Birthdate :		Gender: 🗆 Male	🗆 Female	
	Month/Day/Year			
Etheria Daalaan				

Ethnic Background:

African American	□ Asian, Pacific Islander or Native Hawaiian
Hispanic	American Indian or Native Alaskan
Caucasian	□ Other

Membership Agreement

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.

Signature

By signing above, I acknowledge that I will accept emails, faxes, and other communications from NAIOP.

Payment Information

(from selected Membership Category)

NAIOP Dues \$ New Member Processing Fee (one-time) + \$20
Total Payment Authorized \$
UISA MasterCard AMEX
Credit Card Number Exp. Date
Name of Cardholder (please print) CVV
Billing Address (if different from main contact information)
□ 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.
★ 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.
\star The \$20 processing fee is a one-time fee and will not appear on renewal notices.
* Questions about NAIOP's Refund Policy? Please call the Membership Department

Please fax both pages of your completed application (and any accompanying documentation) to: 703-904-7942 Mail application with payment (and any accompanying documentation) to: NAIOP, CL500060, PO Box 5007, Merrifield VA 22116-5007