


Management Company/Independent Owner Name: _____

Total Units x	Per Unit +	Base Fee = Dues Owed
0 - 9	\$.30	\$210
10	\$.30	\$265
11 - 49	\$.25	\$265
50 - 200	\$2.75	\$100
201 - 299	\$2.70	\$100
300 - 349	\$2.65	\$100
350 & over	\$1.85	\$100

Membership dues are based on the above schedule. If you are an *IAA Member and would like to join the Tippecanoe Apartment Association, please contact your local affiliate or IAA at (317) 816-8900 for local dues.* Membership dues are prorated after March 1 to ensure your membership is on a calendar year basis. Please include your check with this application form and mail to:

Indiana Apartment Association
9100 Keystone Crossing, Suite 725
Indianapolis, IN 46240
Fax: 317-816-8911

Or, pay by Credit Card:



Card # _____

Name on Card _____ Expiration Date _____

Cardholder's Address _____ Security Code _____

City _____ State _____ Zip _____

This firm certifies that the foregoing statements are true & accurate and agrees if elected to membership that in accepting the privileges it will also accept the obligations of membership; that it will be governed by the by-laws of the Tippecanoe Apartment Association and the Indiana Apartment Association as long as it continues as a member and further agrees to promote the objectives of the association. We consent to receive any and all e-mail and fax communications from IAA or persons acting on their behalf.

Important Tax Information: Under the provisions included in section 1070(a) of the Revenue Act passed by Congress in December, 1987: 1. Contributions to the Tippecanoe Apartment Association are not deductible as charitable contributions for federal income tax purposes. 2. In compliance with Omnibus Budget Reconciliation Act of 1993, 38.52% of membership dues are not deductible as a business expense. 3. For specific guide-lines concerning your particular situation, it is recommended that you consult a tax professional.

In the event of termination of membership in the *Tippecanoe Apartment Association*, this firm agrees to discontinue the use of the insignia in any form. The applicant whose signature appears below hereby authorizes the *Tippecanoe Apartment Association* to investigate the history of the past seven years for the purpose of determining approval or disapproval of this membership application.

Date _____ Mgmt. Co/Independent Owner Name _____

Signature _____ Title _____

Mailing Address _____

Recommended for membership by Member _____

NOTE: As a member of this association, you become a member of the National Apartment Association. \$18.00 of each member's annual membership dues goes toward a one-year subscription of NAA's Units magazine and is non-deductible from association dues payment. As a member of this association, you are entitled to all membership benefits and services of the National Apartment Association and Indiana Apartment Association at member rates.