

Building Association Managers
OFFICIAL ASSOCIATE MEMBERSHIP
APPLICATION

P.O.Box 214865 • South Daytona, FL 32121-4865 • 386.760.7734 •BAMInfo@BuildingAssociationManagers.com

Name: _____	ASSOCIATES DUES \$200 Per Year	
Business Name: _____		
Type Of Business: _____		
Occupational License# _____		
Address: _____		
City: _____	State: _____	Zip: _____
Office Phone: _____	Fax: _____	Home Phone: _____
Email: _____	Web Address _____	Birth Month/Day _____ / _____

All applications NOT completed as required will be returned to the individual making application
Applications must be signed by three current BAM managers who are sponsoring applicant for membership

Sponsor Sign Name	Sponsor Print Name
1. _____	_____
2. _____	_____
3. _____	_____

This application is submitted with my complete knowledge and understanding to the following:

1. I certify the information I give is truthful and correct.
2. I agree to comply with the by-laws, declarations and Principals of the Building Association Managers.
3. Should it ever become necessary to revoke my membership I hereby agree to waive any and all claims against any member, director, officer or employee of the Building Association Managers, Inc.
4. All information given will be held in strict confidence within its membership ranks.

The membership year runs from July 1, through June 30th.
Half year dues accepted between January and June.
There are no other pro-ration of dues.

Signature: _____ Date: _____

OFFICE USE ONLY

Membership Committee Disposition: _____ Date of Action: _____
Dues Received By: _____ Cash/Check Amount \$ _____