



Southwest Missouri Rental Housing Association

Membership Application

P O Box 1801, Joplin, MO 64802-1801

417-781-3337

info@swmorental.com www.swmorental.com

Company Name: _____

Main Contact Name: _____
Suffix First Middle Last

Address: _____

City State Zip Code

Work Phone No.: (417) _____ Cell Phone No.: (417) _____

Fax No.: (417) _____ E-Mail Address: _____
Must have for monthly newsletter

Property Manager's Name: _____
Suffix First Middle Last

No. of Units: _____ Referred By: _____

I DO authorize the Association to list my name, e-mail and telephone number on the Association's web site. I have my own web site: _____, please provide a link from the Association's web site to my web site (and we ask the same of you).

I DO NOT authorize the Association to list my name, e-mail and telephone number on the Association's web site.

Member or Authorized Agent Signature: _____ Date _____

Owner Member @ \$135.00	\$ _____
(Owner or Property Manager of rental units)	
_____ Rental Units @ \$1.00 ea	\$ _____
(# Units)	
Associate Member @ \$125.00	\$ _____
(Tradesmen or Vendors)	
Total Due	\$ _____*

*Please make check payable to SW MO Rental Association.

For Office Use Only

Date: _____ Approved: _____ Sponsor: _____

SWMO ID # _____ MAA ID # _____

NAA ID # _____

Member Type: Associate Management Co Property Owner Community