



# APPLICATION FOR MEMBERSHIP - MANAGER/AFFILIATE BUILDING MANAGERS INTERNATIONAL

Name: (please print) \_\_\_\_\_

Mailing Address: Street (& Apt.#) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: Work (\_\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_\_) \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

Fax (\_\_\_\_\_) \_\_\_\_\_ EMail Address \_\_\_\_\_

Assoc. or Co. Name: \_\_\_\_\_

Assoc. or Co. Address: \_\_\_\_\_

Type of Community: Condominium \_\_\_\_\_ H.O.A. \_\_\_\_\_ Other \_\_\_\_\_ Total Units \_\_\_\_\_

Membership as:  Active Member  Affiliate  Manager Applicant CAM License #: \_\_\_\_\_

**PREVIOUS EMPLOYMENT:** (Employer, Address, Position, Length Employed):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**THREE LOCAL REFERENCES WITH ADDRESS AND PHONE NO.** (other than Sponsors):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This application is submitted with the full understanding:

- A. That the information given herein is given for the sole purpose of helping the Membership committee judge my eligibility for membership and that this information will be held strictly confidential.
- B. That all information given herein is complete and correct to the best of my knowledge.
- C. That all claims against Building Managers International or any of its officers or employees for refusing or revoking membership is hereby waived.

I will comply with the principles and declarations of Building Managers International as set forth in its by-laws and code of ethics.

Remittance attached: \$ \_\_\_\_\_ Return to: \_\_\_\_\_

Date Signed: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

By signing, the applicant recognizes that BMI or their agent, may investigate the information supplied by the applicant.

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**FOR OFFICIAL USE**

Primary Sponsor: \_\_\_\_\_

Chapter: \_\_\_\_\_

Co-Sponsor: \_\_\_\_\_

Approved By: \_\_\_\_\_

(Sponsor signatures required.)

Date Approved: \_\_\_\_\_

Date Mailed to National Office: \_\_\_\_\_

Membership Confirmed: \_\_\_\_\_

Plaque and card Mailed: \_\_\_\_\_

**Note: Associate Members must be sponsored by two active B.M.I. members, one of which be a Manager member.**



## DUES RATE SCHEDULE

	MAY 15 <sup>TH</sup> - DEC. 31 <sup>ST</sup>	JAN. 1 <sup>ST</sup> - MAY 14 <sup>TH</sup>
ACTIVE MANAGER	\$150.00	\$ 75.00
AFFILIATE	\$ 75.00	\$ 37.50
MANAGER APPLICANT	\$ 75.00	\$ 37.50

FIGURE YOUR DUES HERE \$ \_\_\_\_\_ + \$25.00 = \$ \_\_\_\_\_  
(DUES FROM CHART) (PROCESSING FEE) (TOTAL DUES)

Any member who joins between January 1<sup>st</sup> and May 14<sup>th</sup> will receive their membership information, pin and card but will not receive plaque until they renew for a full year.

PLEASE MAKE CHECKS PAYABLE TO: BUILDING MANAGERS INTERNATIONAL

THE DUES RATE FROM THE ABOVE CHART THAT SHOULD BE USED WILL BE WHATEVER APPLIES ON THE DATE THE CHAPTER BOARD APPROVES THE APPLICATION. IT WILL REMAIN, HOWEVER, THAT AN APPLICANT IS NOT A MEMBER UNTIL THE NATIONAL OFFICE RECEIVES ALL INFORMATION IN FULL. A BMI MEMBERSHIP YEAR RUNS FROM JULY 1<sup>ST</sup> THROUGH JUNE 30<sup>TH</sup>.

### MEMBERSHIP DESIGNATIONS

#### ACTIVE MANAGER MEMBER

1. Any person who performs managerial duties and reports directly to the Community Association Board of Directors . They shall hold a license, if required by law, to provide their services.

-OR-

2. Any person who performs managerial duties and reports directly to a Community Association Manager or a General Manager. They shall hold a license, if required by law, to perform their duties.

#### AFFILIATE MEMBER

Any person performing duties in support capacity that assists in the operation of a Community Association, under the direct supervision of a Community Association Board of Directors. They shall hold a license, if required by law, to perform their duties.

#### MANAGER APPLICANT

Any person actively seeking a position of a Community Association Manager -OR- pursuing their license, as required by law. A Manager Applicant will have twelve (12) months from the date they join BMI to change their status to an Active Manager Member or an Affiliate or that person will be dropped from membership at the next renewal period. The dues will be the same as an Affiliate Member.

### RENEWAL OF MEMBERSHIP

ANNUAL DUES ARE DUE AND PAYABLE ON JULY 1<sup>ST</sup> OF EACH YEAR. ANY MEMBER WHOSE DUES ARE NOT PAID BY JULY 31<sup>ST</sup> SHALL BE DROPPED FROM MEMBERSHIP IF NOT PAID BY AUGUST 31<sup>ST</sup>.

THE NATIONAL OFFICE SHALL MAIL ANNUAL RENEWAL NOTICES THE FIRST OF MAY EACH YEAR, WITH A FOLLOW-UP NOTICE TO ALL WHO HAVE NOT PAID BY THE THIRD WEEK OF JULY.

QUESTIONS ABOUT BMI SHOULD BE DIRECTED TO THE BMI CHAPTER YOU ARE WORKING WITH OR YOU MAY CALL THE NATIONAL OFFICE. OUR PHONE NUMBER IS (941) 426-1433 OR FAX (941) 426-4042.