



Apartment Association of the Panhandle Product/Service Member Application

Company Name: _____ How did you hear about us? _____

Primary Contact: _____ Title: _____

Full Mailing Address: _____

Email Address: _____ Phone: () _____ - _____

Fax Phone: () _____ - _____ Cell Phone: () _____ - _____ May we use for texts? Y N

{	Corporate Office Name: _____ Bill to Corporate Office? _____	}
	Corporate Office Primary Contact: _____	
	Address: _____	
	Email Address: _____ Phone: () _____	

Your membership includes free directory listings on our website. Which categories are applicable to your business?:

MEMBER INTEREST/COMMUNICATION PREFERENCE

AAP holds a number of classes, meetings, and seminars that you can attend. We communicate our events via email, text reminders, & our newsletter, *The Habitat*. Please indicate how you'd like to receive your AAP updates.

E-Mail Text No thank you.

Please note: you may still receive TAA/NAA updates or invoices via email.

MEMBERSHIP DUES

Product/Service Member: A vendor or supplier of goods and/or services to the multi-family industry. Members are referred to as "Vendor Members" or "PSC Members." Must provide services within the twenty-six panhandle counties covered by the AAP. Counties include: **Armstrong, Briscoe, Carson, Castro, Childress, Collingsworth, Dallam, Deaf Smith, Donley, Gray, Hall, Hansford, Hartley, Hemphill, Hutchinson, Lipscomb, Moore, Ochiltree, Oldham, Parmer, Potter, Randall, Roberts, Sherman, Swisher, and Wheeler.**

Line 1: \$235 = Annual Investment

Line 2: _____ = Optional Advertising Packet (See Reverse)

Line 3: _____ = Total investment for first year's membership (Lines 1 & 2 Total)

Please read the Membership & Communication Agreements and the Code of Ethics on page 5 of this form. By signing below, you confirm that you are authorized to do so & hereby agree to the information provided.

Signature: _____ Date: _____