

BOMA MEMBERSHIP APPLICATION

LOCAL ASSOCIATION ADDRESS

BOMA of Northwest Arkansas
P.O. Box 2698
Bentonville, AR 72712

E-mail : bomaofnwa@gmail.com

NOTE: Please return to local association's address at left. Dues information provided by local association.

LOCAL REPRESENTATIVE INFORMATION (PLEASE TYPE OR PRINT)

FIRST NAME	MIDDLE INITIAL	LAST NAME DESIGNATION(S)
TITLE		
COMPANY		
ADDRESS		
CITY	STATE/PROVINCE 9 DIGIT	ZIP/POSTAL CODE
TELEPHONE	FAX	INTERNET E-MAIL
TYPE OF BUSINESS	HOW LONG IN BUSINESS	NUMBER OF YEARS IN FIELD

DEMOGRAPHIC INFORMATION (REQUIRED)

1. Occupation (check one)

- Building Owner
- Building Manager
- Facility Manager
- Property Manager
- Asset Manager
- Architect
- Appraiser
- Purchasing Agent
- Leasing Agent/Broker
- Investor
- Engineer
- Developer
- Other _____

2. What is your primary type of business or organization? (check one)

- Property management
- Real estate management
- Manufacturer
- Banker
- Real estate broker
- Insurance
- Communications services
- Real estate investment
- Distributor/rep.
- Government
- Utility
- Education
- Architect
- Consultant
- Contractor
- Health care
- Association
- Other _____

3. How many square feet of office space do you manage? (check one)

- Less than 50,000
- 50,000 – 100,000
- 101,000 – 300,000
- 301,000 – 600,000
- 601,000 – 1 million
- Over 1 million

4. How many buildings do you, not your company, manage? (check one)

- 1
- 2-5
- 6-10
- 11-20
- 21-50
- Over 50

5. What types of properties do you represent? (check all that apply)

- Government buildings
- Medical buildings/hospitals
- High-rise commercial Office
- Low-rise commercial office
- Suburban buildings/office parks
- Shopping centers/malls
- Schools, colleges, Universities
- Office condominiums
- Parking facilities
- Warehouses
- Hotels
- Other _____

6. Where are your properties located? (check one)

- Downtown
- Suburbs
- Combination

TOTAL BUILDING RENTABLE AREA

Sq. Ft.

BUILDING OFFICE AREA

Sq. Ft.

BUILDING RETAIL AREA

Sq. Ft.

I UNDERSTAND THAT BY PROVIDING MY MAILING ADDRESS, EMAIL ADDRESS, TELEPHONE NUMBER, AND FAX NUMBER, I CONSENT TO RECEIVE COMMUNICATIONS BY OR ON BEHALF OF BOMA VIA REGULAR MAIL, EMAIL, TELEPHONE AND/OR FAX.

I hereby request membership in the Building Owners and Managers Association

APPLICANT SIGNATURE

DATE OF APPLICATION

DUES SCHEDULE: PRINCIPAL _____ PRINCIPAL ADDITIONAL _____

ASSOCIATE _____ ASSOCIATE ADDITIONAL _____

 _____ % OF 2010 DUES IS TAX DEDUCTIBLE

NOTE: A percentage of your dues payment to BOMA International is deductible for federal income tax purposes as an ordinary and necessary business expense. Contributions or gifts to BOMA International are not deductible as charitable contributions.

