

APPLICATION FOR MEMBERSHIP

WESTERN MONTANA LANDLORD'S ASSOCIATION

PO Box 3613

Missoula, Montana 59806

Name of Individual/Company: _____

Are you a Property Manager? YES ___ NO ___ Property Owner? YES ___ NO ___

Mailing Address: _____

E-mail Address: _____

Home Phone: _____ Business Phone: _____

How many rental units do you own/manage? _____

Desired User Name: _____ Password: _____

Referred by: _____

In making this application, I/We agree to abide by the By-Laws of the Western Montana Landlord's Association. In the event of termination of membership in the Western Montana Landlords Association, I/We agree to discontinue the use of the Association's forms and discounts. I/We agree not to distribute forms belonging to the Western Montana Landlords Association to non-members.

The remittance attached represents dues in the Western Montana Landlords Association for the fiscal year, beginning March 01 to March 01 of the following year. The annual membership fee is \$50.00 (fifty dollars) for all having from one to twenty-five units. Others having twenty-six or more units shall pay \$75.00 (seventy-five dollars)

I HEREBY AGREE TO ABIDE BY THE RULES AND REGULATIONS OF THE WESTERN MONTANA LANDLORDS ASSOCIATION. I UNDERSTAND THAT FAILURE TO ABIDE BY THESE RULES AND REGULATIONS WILL RESULT IN TERMINATION OF MY MEMBERSHIP AND THE LOSS OF THE QUALIFICATION OF LANDLORD IN GOOD STANDING.

I FURTHER UNDERSTAND THAT I MAY NOT PROVIDE COPYRIGHTED FORMS TO NON-QUALIFIED PERSONS (NON-MEMBERS) FOR THEIR OWN USE. BY PROVIDING SAID FORMS TO PARTIES OTHER THAN MEMBERS IN GOOD STANDING OF THE WESTERN MONTANA LANDLORDS ASSOCIATION I AM LIABLE, AND UNDERSTAND I CAN BE PROSECUTED SHOULD THE ASSOCIATION CHOOSE TO DO SO.

SIGNATURE

DATE _____

SIGNATURE

DATE _____