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APARTMENT ASSOCIATION OF MICHIGAN

30400 Telegraph Road, Suite 202, Bingham Farms, MI 48025 PHONE (248) 737-4477 FAX (248) 538-4078



VICE PRESIDENTS

CARY BELOVICZ

MITCHELL BLEZNAK

JONATHAN BORENSTEIN

Application For Membership

Apartment Association of Michigan

		JAY BRODY
NAME	TITLE	KEVIN DILLON
Company Name		LESLIE LEWISTON ETTERBEEK
Business Address		AARON ROSENHAUS
County/City/Zip	Phone	SHAWN STAFFORD
Residence Address		MICHAEL TOBIN
(Kept Strictly Co	onfidential - For Emergency Use Only)	DAVID WILKINS
City/Zip	Phone	
Email		
Names of Owners/Partners		

Membership Fee Schedule: \$1.80 per unit. Minimum \$250; Maximum \$6,300.

APARTMENTS OWNED OR MANAGED BY APPLICANT					
Apartment Name	Address	Manager	Phone	# of Units	
(Use reverse side for additional listings if necessary					

NOTE: The foregoing information is confidential, for use of staff only.

DateSignature of Ap	oplicant
My signature on this form gives AAM po	permission to contact me and my company by mail, email, fax and/or phone.
Enclosed is my check in the a	amount of \$ representing my first year's dues for units as noted above
Account #	Expiration Date
Please charge my dues of \$_	