



COMMERCIAL REAL ESTATE
DEVELOPMENT ASSOCIATION

2019 University Membership APPLICATION

NAIOP.ORG

Greater Toronto Chapter

The University Membership Program is available to colleges and universities offering undergraduate and/or graduate programs in real estate. Full-time students enrolled and pursuing a real estate degree in a college or university holding a NAIOP membership in this category will receive select NAIOP benefits.

Contact Information

MR MS MRS DR

NAME (First, MI, Last)

NICKNAME

ADDRESS

CITY/STATE

ZIP CODE

PHONE NUMBER

EMAIL

UNIVERSITY/COLLEGE

Payment Information

- Dues for NAIOP University memberships are valid for up to 12 months through August 31.

- Membership dues for Universities joining after December 31 are reduced by 50 percent.

TOTAL: \$ _____

VISA MASTERCARD CHECK (Payable to NAIOP)

CREDIT CARD NUMBER

EXPIRATION DATE

NAME OF CARDHOLDER

Membership Level

Students:

Dues:

- | | | |
|----------------------------------|---------|-------------|
| <input type="checkbox"/> 1-25 | \$ 500 | * \$ 78.80 |
| <input type="checkbox"/> 26-50 | \$1,000 | * \$ 157.60 |
| <input type="checkbox"/> 51-100 | \$2,000 | * \$ 310.27 |
| <input type="checkbox"/> 101-300 | \$6,000 | * \$ 906.20 |
| <input type="checkbox"/> 301+ | \$6,750 | * \$1058.87 |

* The non-deductible amount shown above indicates the portion of the dues that are non-deductible for federal income tax purposes.

▶▶ *The college/university maintaining a membership must designate a current employee (**not a student**) affiliated with the institution to serve as the point of contact for the membership.*

▶▶ *Please provide a list of students and their emails as an attachment to this application.*

Membership Agreement

SIGNATURE

DATE

By signing above, I acknowledge that myself and the designated student members will accept faxes, emails and other communications.

APPLICATION CHECKLIST

- COMPLETED APPLICATION
- LIST OF STUDENTS / EMAILS (ATTACH SEPARATELY)
- PAYMENT

RETURN APPLICATION WITH PAYMENT TO: NAIOP, CL500060, P.O. BOX 5007 MERRIFIELD, VA 22116-5007
OR FAX TO 703-904-7942

Questions? Call 800-456-4144