



NATIONAL MEMBER APPLICATION

National members of the National Association of the Remodeling Industry are firms, corporation or individuals, other than contractors, whose business or interest in the remodeling industry is normally in multiple states. Eligibility for membership requires that applicant company must have been actively involved in the remodeling industry for at least one year prior to application date; shall conduct business in compliance with the NARI Code of Ethics (which are posted on the website), and shall agree to comply with the association's national bylaws.

(Please type or print)

Company: _____

Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

E-mail: _____ Website: _____

HOUSE OF DELEGATES REPRESENTATIVE

National Members of NARI are entitled to designate one individual as representative on the NARI National House of Delegates. Please indicate the name of this individual:

Name: _____ Title: _____

Address (if different from above): _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____ E-mail: _____

DUES SCHEDULE: Annual dues are based on ANNUAL SALES VOLUME in the home improvement and remodeling industry, including all divisions of a parent company

- \$0 to \$1,000,000\$975 \$15,000,001 to \$30,000,000\$4,500
- \$1,000,001 to \$7,000,000\$1,200 \$30,000,001 to \$60,000,000\$5,000
- \$7,000,001 to \$15,000,000\$2,300 Over \$60,000,000\$5,500

Note: Lenders please use annual net loan volume originated, in lieu of sales volume. Associations base dues on total annual revenue.

SUBSIDIARY DISCOUNT: The parent, subsidiary, brand, division, etc., of a current National Member can also join for the minimum dues if another element (or another brand, division, etc.) is paying their full dues level. If a subsidiary, brand or division joins first, the sum of the parent and 1st subsidiary must equal the prescribed dues as if parent had joined first, e.g., \$5,500. Thereafter, the others can join at the lowest dues level which is \$975 each.

Please provide the following materials with this application and applicable dues: Annual report, historical profile, or statement of correct dues category on CPA letterhead. Payment must accompany application.

I hereby affirm that the dues are based on current level of sales:

Signature _____ Date _____

NARI membership dues are not deductible as charitable contribution but may be deductible as an ordinary business expense. To the extent that NARI engages in lobbying, 8 percent of dues are not deductible as an ordinary and necessary business expense.

APPLICANT PROFILE

1. Please give the names of the persons within the applicant company in the following positions:

President: _____

Chief Marketing Executive: _____

2. Is the applicant company the parent company or a subsidiary? _____

3. Parent company if applicant is a subsidiary: _____

Contact Name: _____ Address: _____

Telephone: _____ E-mail: _____

4. Are there other brands, divisions, or subsidiaries within your company parent company doing business in the remodeling industry? If so please list:

Brand, division, subsidiary or parent name: _____ Contact: _____

5. Local branches are: franchised wholly owned both other, please explain _____

6. Primary product(s)/services (10 maximum): _____

7. How did you learn about NARI? Trade Press Convention Other (list) _____

8. Who referred you? _____ Company: _____

9. Number of years in business? _____ Operating: Nationwide U.S. U.S. & Canada
 Internationally Regionally

CREDIT CARD PAYMENT (otherwise mail payment to address at bottom of page)

MasterCard *Visa* *American Express*

Card Number: _____ **Expiration Date:** _____

Cardholder's Name (and/or company as printed on card): _____

Full billing address for card (and/or company): _____

Cardholder's Signature: _____ **Authorizing Signature:** _____

Date: _____

FCC regulations require us to ask your permission to use your fax number to communicate with you. Please fill in the form below with your name, fax number, signature and date so that you may receive communication via fax from the National Association of the Remodeling Industry (NARI). In accordance with our privacy commitment, NARI will not share this information with outside parties or use it for any other purpose.

Print your name: _____ Print Your Company name: _____ Fax number(s): _____

Signature _____ Date _____

By signing this fax agreement you certify that you are authorized to make decisions about what fax transmissions may be received.

**Please return to: NARI, P.O. Box 4250 • Des Plaines, Illinois 60016
847-298-9200 Fax 847-298-9225**