



MEMBERSHIP APPLICATION FORM

Application Instructions:

1. Membership applications are reviewed each month by the Board of Directors at their monthly meeting.
2. Your application should be accompanied by a check for \$120.00 made out to Southwest Idaho Chapter NARPM.
(membership dues includes free breakfast at the monthly meetings)
3. If your application is denied, your check will be returned. Please call 208-336-5111 for more information.

Deliver this completed application and membership dues to:
S.W. Idaho NARPM, 4619 W. Emerald Street, Suite 101, Boise, ID 83706

Company Name: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Company Contact: _____ Title: _____

Fax: _____ Cell: _____ E-mail: _____

Referred or recommended by: _____

Please respond to the following questions:

1. Have you declared personal bankruptcy or has a company which you hold or have held a majority interest in declared bankruptcy in the past three years? *If yes, attached detailed explanation* Yes: _____ No: _____
2. Have you been involved in either civil or criminal proceedings as a defendant in which allegations of fraud, misrepresentation, or misappropriation of funds or property, etc? Yes: _____ No: _____
3. Are you currently or have you been subject to disciplinary action by another professional organization or state licensing bureau? Yes: _____ No: _____
4. Are you currently required to register as a sex offender in this state or any other state?
If yes: State _____ County _____ Yes: _____ No: _____
Please attach a letter of explanation for any questions answered "yes" above
5. Are you a licensed real estate agent? Yes: _____ No: _____
6. Are you currently engaged in the management of residential properties as an agent for others?
 Yes: _____ No: _____
 If yes, how many years? _____

Please provide us with two local references and a bank reference:

Company: _____ Phone: _____

Length of relationship: _____ business personal Contact : _____

Company: _____ Phone: _____

Length of Relationship: _____ business personal Contact : _____

Bank: _____

Contact : _____ Phone: _____

I/We understand that Membership in the Southwest Idaho Chapter of the National Association of Residential Property Managers (NARPM) is limited to those professionals that provide Residential Property Management services. I/We understand that membership does not constitute an endorsement of the members services. NARPM makes no representations or warranties regarding the quality of products or services of the Affiliate Members. I/We agree to hold NARPM free and harmless of any liability for wrongful or negligent acts, or omissions of the applicant or of the applicant's agents or employees. I further agree to abide NARPM's codes of ethics, governing laws, rules and regulations, and principles.

Signature _____