



APPLICATION FOR MEMBERSHIP

Application is hereby made for membership. Our Company is currently a member in good standing of MHI. If approved for membership, applicant agrees to abide by the Bylaws/Rules and Regulations as may be amended and make timely payments of dues and assessments. Please type or print clearly when completing the application below.

Name of Corporation _____

Street Address _____

City _____ State _____ Zip Code _____

Telephone Number _____ Fax Number _____

Internet Address (www.) _____

Our principle interest in this field is (please select the option that best fits):

- Manufacturer Component Supplier Other (please specify: _____)
- Integrator Consultant

Persons who will represent the member company are:

Membership Delegate:

Name _____ Title _____

Phone (office) _____ Phone (cell) _____ E-Mail _____

Membership Alternate:

Name _____ Title _____

Phone (office) _____ Phone (cell) _____ E-Mail _____

Name of person authorizing application who verifies that the facts set forth are true and correct:

Title _____ Signature _____ Date _____

Please send completed application to IndustryGroups@mhi.org

8720 Red Oak Boulevard, Suite 201, Charlotte, NC 28217 • Phone: 704-676-1190 • Fax: 704-676-1199