



One Chamber Plaza Suite 100 B
Dayton, OH 454302
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Application for Membership

Company Name: _____
Contact Name: _____
Address: _____
City, State, Zip: _____
Phone: _____ Fax: _____
E-mail: Address: _____ Website: _____
Primary Business Activity: _____
HBA Sponsor Name and Company: _____

HBA Membership Dues

Builder Members

Under \$2 million	\$684
\$2—\$10 million	\$857
\$10 million plus	\$1,265

Administrative fee \$50

TOTAL Dues \$_____

Payment Method

_____ Visa _____ MasterCard _____ American Express _____ Check

Accountholder Name: _____

Accountholder Number: _____

Amount: \$_____ Exp. Date: _____ Code: _____ Signature: _____

Please make the check payable to the Home Builders Association of Dayton.

I agree to abide by the bylaws of the of the Home Builders Association of Dayton, including dues and financial procedures.

Signature: _____ Date: _____