



**LANDLORDS OF JOHNSON COUNTY,
KANSAS, INC.**

P.O. Box 4282,
Shawnee Mission, KS 66204

MEMBERSHIP APPLICATION

Please type or print an answer to all questions. If married, application should be made by spouse primarily responsible for the management of your properties. There is NO additional fee for your spouse.

Membership for applicant only _____ or Membership for applicant and spouse _____
Type of membership: Active _____ Provisional _____ Associate _____

Please use home address. If you prefer to have the monthly newsletter mailed to a different address, check here _____ and print mailing address on back of the application.

Applicant _____ Home address _____
City _____ State _____ Zip _____
Home Phone _____ Applicant's Business Phone _____
Applicant's Occupation (other than rentals) _____
Applicant's Employer _____
Name of Spouse _____ Occupation _____
Employer _____ Business Phone _____

List Below Residential
Rental Property Owned

Show type of dwelling, such as House,
Townhouse, condo, duplex, complex & apt.
Type of dwelling

Address	and	City	Type of dwelling
1. _____		_____	_____
2. _____		_____	_____
3. _____		_____	_____

If necessary, use back of page to continue listing of properties.

Please list below subjects you would like to hear discussed at our meetings, and suggested speakers.

I (we) have owned residential property for _____ years.

I (we) manage our properties personally: Yes _____ No _____

Check at least one of the following committees on which you or your spouse would be willing to serve:

Suppliers and workmen list _____	Legislative Affairs _____	Telephone Calling _____
Pot Luck Dinner _____	Programs _____	Public Relations _____
Newsletter & Advertising _____	Membership _____	Budget & Finance _____

Signature _____ Date _____ Referred by _____

E-mail Address _____

Would you like to receive your monthly newsletter by email? Yes _____ No _____