



MEMBERSHIP APPLICATION

# AMHO

ASSOCIATION OF MANUFACTURED HOME OWNERS

WASHINGTON STATE

WWW.WAMHO.ORG



**MEMBERSHIP TYPE**

New Member

Renewal

Friend of AMHO

**RESIDENT INFORMATION (PLEASE PRINT BOLDLY)**

FULL NAME(S)

TODAY'S DATE

PARK / COMMUNITY NAME

STREET ADDRESS

UNIT #

CITY

STATE

ZIP CODE

**CONTACT DETAILS**

PRIMARY PHONE

**COMMUNITY ORGANIZATION**

ORGANIZATION NAME (IF ANY)

EMAIL ADDRESS

CONTACT NAME

PHONE / EMAIL



I would like to volunteer!



Host a community event!

Please send your **\$15.00 membership fee** and application to:

**AMHO**

**2430 Mockingbird Lane  
Kelso, WA 98626**

**WWW.WAMHO.ORG**

**ADMIN USE ONLY**

DATE REC'D

CASH/CK #

DUES \$

DON. \$

MERCH \$

**TOTAL \$**