Manufactured Housing Institute

Celebrating 50 Years Of Partnership with HUD

Suppliers Division Membership Application

Company Name

Address

City State ZIP

Website Phone

Is your company incorporated? Yes No Not Sure

Who recommended you to join MHI?

PRIMARY CONTACT serves as the company's main point of contact for MHI membership and billing. In addition, the primary contact will receive all MHI communications, votes on behalf of the member company, and may run for office positions available to the membership category.

ALTERNATE CONTACT serves in place of the primary contact when he/she is absent or unavailable.

Primary Contact

Title Email

Address

City State ZIP

Phone

Alternate Contact

Title Email

Address

City State ZIP

Phone

Billing Contact
(If different than Primary)

Title

Email Phone

Select the membership category that best represents your business:

Wholesale

Annual sales to the manufactured housing industry

- ☐ under $500,000.....$1,000
- ☐ $500,001 to $1,000,000.....$1,438
- ☐ $1,000,001 to $3,000,000.....$1,869
- ☐ $3,000,001 to $6,000,000.....$2,444
- ☐ $6,000,001 to $9,000,000.....$3,594
- ☐ $9,000,001 to $12,000,000.....$5,031
- ☐ $12,000,001 to $20,000,000.....$6,469
- ☐ Over $20,000,000.....$7,188

After Market Suppliers

Number of states in which your company does business

- ☐ 1 to 5 States.....$1,000
- ☐ 6 to 10 States.....$1,438
- ☐ 11 to 20 States.....$2,530
- ☐ 21+ States.....$3,450

Professional Service Provider

Reference "WHOLESALE SUPPLIER" for dues amounts

- ☐ Attorney
- ☐ Consultant
- ☐ Non-Profit
- ☐ Architect

Application Fee and Dues Payment

- ☐ Enclosed is a check for our membership dues as indicated plus the $100 application fee.
- ☐ Please charge our credit card for our membership dues as indicated plus the $100 application fee.

Card Number _____ Expires _____

Billing Address _____

City _____ State _____ ZIP _____

Name on Card _____

MEMBER COMPANIES AGREE TO ABIDE BY THE MHI BYLAWS AND THE SUPPLIERS DIVISION RULES AND OPERATING PROCEDURES.

I hereby certify that the information in this application is true and correct, and I agree that failure to provide complete and accurate information as requested, or any misstatement of fact, shall be grounds for revocation of my membership in MHI, if granted. I further agree that, if accepted for membership in MHI, I shall pay dues and abide by MHI's Bylaws, rules and directives, including those covering use of MHI's trademark and other intellectual property. By signing below, I consent to MHI contacting me at the specified address by any means of communication available and to having my information listed in MHI's directory of members.

Signature _____ Date _____

Printed Name _____

To submit completed application form:
Send by email to: membership@mfghome.org
Send by mail to: MHI | Attn: Membership
1000 Wilson Blvd, Suite 2502, Arlington, VA 22209

Contributions to the Manufactured Housing Institute are not tax deductible as a charitable contribution. For 2026, 25% of contributions relate to lobbying and are not deductible as a business expense; 75% may be deductible as a business expense. Final approval for your membership application will be determined by MHI's Board of Directors.