



# 2011

## Southern California's Professional Association By and for Shopping Center Professionals

### Membership Application & Renewal

Please print clearly. Information will appear exactly as printed below in the Membership Directory

**Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Prof. Designation(s):** \_\_\_\_\_

**Company:** \_\_\_\_\_

**Center(s) if applicable:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Website:** \_\_\_\_\_

**Please provide a brief description of your company:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Shopping Center**

**Vendor/Supplier**

**# of Stores at your Center:** \_\_\_\_\_ **GLA:** \_\_\_\_\_

**Anchors:** \_\_\_\_\_

**Membership Fees are \$65 per person, per fiscal year (Feb 1 - January 31)**

Please make a copy of this form for your records/invoice. Federal Tax ID# 33-0282505

List 2011 Members Here:	Title & email:	
_____	_____	<b>\$65.00</b>
_____	_____	<b>\$65.00</b>
_____	_____	<b>\$65.00</b>
_____	_____	<b>\$65.00</b>
<b>SCMDA Scholarship Donation optional</b>		<b>\$25.00</b>

**TOTAL AMOUNT:** \_\_\_\_\_

Please make checks payable to SCMDA. Mail COMPLETED Form along with check to:  
 Virginia Hultman - SCMDA Treasurer  
 c/o GM Properties, 12300 E. Washington Blvd.#A, Whittier, CA90606  
 Questions? Please call Kathy Shaw at 714-377-4523 or [kshaw@hqgiftcards.com](mailto:kshaw@hqgiftcards.com)