



APPLICATION FOR MEMBERSHIP

Regular Membership \$585 – Upgrade Membership \$1175

Contact Person: _____ Title: _____

Company Name: _____ Yrs in Business _____

Local Address: _____

City / State / Zip _____

Phone _____ Fax _____

Corporate Address (if applicable): _____

City / State / Zip _____

Phone _____ Fax _____

Web Site Address _____ E-Mail Address _____

Business Classification (check one box that best represents your company's primary business)

- | | | |
|---|---|--|
| <input type="radio"/> Div 1— General Contractor | <input type="radio"/> Div 7— Moisture Control | <input type="radio"/> Div 13— Special Construction |
| <input type="radio"/> Div 2— Site Work | <input type="radio"/> Div 8— Door / Windows | <input type="radio"/> Div 14— Conveying Systems |
| <input type="radio"/> Div 3— Concrete | <input type="radio"/> Div 9— Finishes | <input type="radio"/> Div 15— Mechanical |
| <input type="radio"/> Div 4— Masonry | <input type="radio"/> Div 10— Specialties | <input type="radio"/> Div 16— Electrical |
| <input type="radio"/> Div 5— Metals | <input type="radio"/> Div 11— Equipment | <input type="radio"/> Other _____ |
| <input type="radio"/> Div 6— Carpentry | <input type="radio"/> Div 12— Furnishings | |

Mission Statement: To promote the development / general welfare of the building contractors' industry in the southwest Michigan Area; to promote ethical practices by persons engaged in such industry in their relationships between themselves and with the general public.

In accordance with the bylaws, memberships are automatically renewed each year. Notice must be given in writing by member should they elect to terminate this membership. I agree to abide by the bylaws of the Builders Exchange of the Kalamazoo Area Inc.

Signature _____ Date _____

PAYMENT IS REQUIRED WITH ALL APPLICATIONS

*Builders Exchange is run by a three member board of directors who serve a three-year term, meeting six times a year to discuss operations and services the Exchange offers its members. **Would you be interested in a position on the board of directors?** _____ Yes _____ No*

How did you hear about us? _____

Date Application / Fee Received _____ Date of Board Approval _____

