
TRI-COUNTY CONTRACTORS ASSOCIATION

APPLICATION FOR MEMBERSHIP

Request for membership in the Tri-County Contractors Association shall be a written application to the Board of Directors. The signed application shall be mailed to:

Tri-County Contractors Association
P.O. Box 9700
Saginaw, MI 48603

This application shall be accompanied by a check in the amount of \$250, which will be considered full payment for the initiation fee. Upon approval of such application by the Board of Directors, the applicant shall be deemed elected to the class of membership for which application was made.

INITIATION FEE: Contractor & Associate Members - \$250 (one time only)

ANNUAL DUES STRUCTURE

| For Contractor Members: | | For All Associate Members: |
|-------------------------|-------------|----------------------------|
| Contractor Sales Volume | Annual Dues | |
| \$0 - \$250,000 | \$225 | \$325 per year |
| \$250,000 - \$1,500,000 | \$325 | |
| Over \$1,500,000 | \$475 | |

MEMBERSHIP APPLICATION

We hereby apply for the following class of membership in the Tri-County Contractors Association: Contractor Member Associate Member

We have read and subscribe to the Purpose and Code of Ethics printed on pages 3 & 4 of the Membership Directory and agree to work with other members for the mutual benefit of the Association and its Membership.

Signed _____ Date _____

Firm Name _____

Address _____

_____ Phone _____

Avg. # Employees (Optional) _____ Type of Business _____

Reference _____ Member Sponsor _____