



Nancy@SanDiegoASA.org or Sharon@SanDiegoASA.org

Membership Application

Company Name: _____

Street Address: _____

Phone: _____ FAX: _____

EMAIL _____

WEBSITE _____

Check one: Specialty Contractor Supplier Service Associate

Type of Contractor or business: _____

State Contractor License No: _____ No. of Employees _____

Average Annual sales volume: _____

Name of Person Designated to attend ASA functions: _____

Company Officers (Name and Title):

I first heard about ASA from: _____

Signature of Applicant

Title

Date _____

Annual Dues: \$1,050.00 for 12 months

Please send completed application with the dues payment; please make checks payable to ASA San Diego County Chapter. Dues to the American Subcontractors Association, San Diego County Chapter, are not deductible as a charitable contribution, but may be deductible as an ordinary business expense. ASA estimates that \$134.00 of your dues is not deductible because of lobbying activities on behalf of its members.

The above listed applicant hereby applies for membership in the American Subcontractors Association of San Diego County. The applicant is an active specialty contractor, supplier or service associate in the San Diego County area and agrees to conform to the bylaws of the association. Copies of the bylaws are available from the association office. I hereby request the San Diego ASA to send communications advertising its products, goods and services to my company's fax machine and/or to the email address listed above until such date that I or my company notifies ASA otherwise. ASA also has permission to use my photo on its website or in its newsletter.