



Collier Building Industry Association Application for Membership

Please print or type application.

Company Name _____
Representative _____ Title: _____
 Street Address _____
 City _____ State _____ Zip _____
 Phone _____ Fax _____ Cell _____
 E-Mail Address _____

Please choose your preferred method of communication: _____ e-mail _____ fax _____ regular mail

Website address _____

Billing Contact (if different from above)

Street Address _____
 City _____ State _____ Zip _____
 Phone _____ Fax _____ E-Mail Address _____

Interested in: () Networking () Advertising () Other _____

Select a category from the provided list on the next page that best describes your primary business function. You will be listed under this category in the next CBIA Membership Directory and in the Online Directory at www.CBIA.net.

(First category is free, each additional is \$35)

Primary Membership Category _____ **Secondary** _____ **Other** _____

of Years in Business _____ **# of Employees** _____ **Annual Sales** _____

Sponsor (Who would you like to get credit for your joining?): _____

Sponsor's company name _____

Annual Membership Fees

| | | | |
|-------------------------------------|---|----------|--------------------------|
| <input checked="" type="checkbox"/> | CBIA Annual Membership (12 months from month of submission) | \$540 | (required) |
| <input type="checkbox"/> | Sales & Marketing Council | \$90 | (per person) |
| <input type="checkbox"/> | Remodelors Council | \$90 | (per person) |
| <input type="checkbox"/> | Additional Categories | \$35 | (each, after first free) |
| <input type="checkbox"/> | Contribution to the Foundation | \$ _____ | (tax-deductible) |

TOTAL PAYMENT \$ _____

A full year's dues must accompany your application. Annual dues include membership in FHBA & NAHB. BIA dues are not tax deductible as charitable contributions for federal income tax purposes. Contributions to the Foundation are tax deductible.

Check Enclosed Check# _____

Credit Card Number # _____

Name on Card: _____

Billing Address for Card: _____

Expiration Date _____ / _____ CRV: _____ Billing Zip Code _____

I understand that providing my mailing address, e-mail address, phone number and fax number, I consent to receive communications by or on behalf of the Collier Building Industry Association (CBIA).

Signature X _____

Membership Pending Board of Directors' Approval

Please complete and return to:

Collier Building Industry Association, 4779 Enterprise Avenue, Naples, FL 34104

Phone (239) 436-6100 Fax (239) 436-3878

Or join on-line at: www.cbiamet.net