



## ASSOCIATED MASONRY CONTRACTORS OF ALASKA, INC.

P.O. BOX 100514, ANCHORAGE, AK 99510

(907) 602-2177

amcainc@alaska.net

### APPLICATION FOR MEMBERSHIP

COMPANY NAME \_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_  
PHYSICAL ADDRESS \_\_\_\_\_  
TELEPHONE \_\_\_\_\_ FAX \_\_\_\_\_  
E-MAIL \_\_\_\_\_

YEAR BUSINESS WAS ESTABLISHED \_\_\_\_\_ TYPE OF BUSINESS \_\_\_\_\_

NAMES OF OWNER(S), PARTNER(S), OR OFFICER(S)  
\_\_\_\_\_  
\_\_\_\_\_

AUTHORIZED REPRESENTATIVES  
\_\_\_\_\_  
\_\_\_\_\_

ARE YOU SIGNATORY TO ANY ORGANIZED LABOR CONTRACTS? \_\_\_\_\_

IF YES, PLEASE LIST: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MEMBERSHIP CATEGORY ☐ CONTRACTOR - \$150 ☐ ASSOCIATE MEMBER - \$100  
(NEGOTIATING MEMBER) (NON-NEGOTIATING MEMBER)

☐ YES ☐ NO I AUTHORIZE AMCA, INC. TO SEND COMMUNICATIONS TO THE FIRM USING THE FAX  
AND E-MAIL ADDRESS PROVIDED.

THE FIRM HEREBY MAKES APPLICATION FOR MEMBERSHIP IN THE ASSOCIATED MASONRY CONTRACTORS OF ALASKA, INC. (AMCA, INC.) ON THE BASIS OF THE FOREGOING STATEMENTS AND REFERS TO THE PERSONS NAMED BELOW WHO ARE PERSONALLY FAMILIAR WITH THE FIRM AND ITS WORK. THIS FIRM CERTIFIES THAT THE FOREGOING STATEMENTS ARE CORRECT, AND AGREES, IF ELECTED, TO MEMBERSHIP THAT IN ACCEPTING THE PRIVILEGES IT WILL ALSO ACCEPT THE OBLIGATION OF MEMBERSHIP THAT WILL BE GOVERNED BY THE ARTICLES OF INCORPORATION AND BYLAWS, AS LONG AS A MEMBER, AND FURTHERMORE AGREES TO PROMOTE THE OBJECTIVES OF THE ASSOCIATION.

PLEASE NOTE THAT MEMBERSHIP IN THE AMCA, INC. IS AN ANNUAL COMMITMENT AND THAT MONTH-TO-MONTH MEMBERSHIP IS NOT OFFERED.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
NAME AND TITLE (PLEASE PRINT)